# P96000022561

Department of State Division of Corporations P.O. Box 6327 Tallahassoo, FL 32314 BETTOR, INC O.S. BURNETTETING. SUBJECT: (proposed corporate name) Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$\_\_122\_50\_\_\_. 200001746062 -03/18/96--01019--001 \*\*\*\*122.50 \*\*\*\*122.50 O.S. BURNETTE, INC. FROM: Name 3965 BESS ROAD Address JACKSONVILLE, FL. 32277 City, State, & Zip 396-7100 Telephone Number

60685 LAP-4863

AUTHORIZATION BY PHONE TO CORRECT COLP name DATE 3-13-76

Note: Additional copy of articles is needed when certified copy is requested.

53/3



#### FLORIDA DEPARTMENT OF STATE Sundra B. Morthum Secretary of State

March 5, 1996

O.S. BURNETTE, INC. 3965 BESS RD. JACKSONVILLE, FL 32277

SUBJECT: O. S. BURNETTE, INC. Ref. Number: W96000004862

We have received your document for O. S. BURNETTE, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$1542.50.

In reviewing our records, we note there is a(n) O.S. BURNETTE, INC., Document number H19764, in existence.

Because of the similarities between the existing corporation and the one you are now seeking to file with us, and because it is our duty to assure that all fees due this office in accordance with section 607.0130(2)(c), Florida Statutes, are collected, we are returning the articles of incorporation unfiled and must request you return the existing corporation to good standing by completing the enclosed reinstatement application and submitting it with the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year for the years 1986 through the current year, \$138.75 supplemental fee for the years 1992 forward. The total fee to file the reinstatement is \$1542.50, therefore, there is a balance of \$1542.50 due. Add an additional \$8.75 for each certificate of status requested.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Sandy Ng Document Specialist

Letter Number: 896A00009672

#### ARTICLES OF INCORPORATION

OF

BETTOR, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.



#### ARTICLE I NAME

The name of the corporation shall be:

BETTOR, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3965 BESS ROAD JACKSONVILLE, FL. 32277

#### ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

## ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ORREN S. BURNETTE
3965 BESS ROAD
JACKSONVILLE, FL. 32277

## ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(are):

ORREN S. BURNETTE
3965 BESS ROAD
JACKSONVILLE, FL. 32277

| undersigned has(have) executed these Articles of Incorporation this |        |               |                 |  |
|---|--------|---------------|-----------------|--|
| 29th  | day of | FEBRUARY      | , 19 <u></u> ,  |  |
|   |        | One 8         | Surve BRESTDENT |  |
|   |        | - Contraction | Signature/Title |  |
|   |        |               | Signature/Title |  |
|   |        | <del></del>   | Signature/Title |  |

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

| 1. | The name of the corporation is: BETTOR, INC.                                   |                             |
|----|--|-----------------------------|
| 2. | The name and address of the registered agent and office is:  ORREN S. BURNETTE | SECRETARY<br>DIVISION OF CO |
| •  | (NAME)<br>3965 BESS ROAD   | AH 8:                       |
|    | (P.O. BOX <u>NOT</u> ACCEPTABLE)  JACKSONVILLE, FL. 32277                      | t l                         |
|    | (CITY/STATE/ZID)   | <b>_'</b>                   |

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

DATE FEBRUARY 29,1996

REGISTERED AGENT FILING FEE: \$35.00