Dalo Cooks 138

March 15, 1996

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Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Enclosed are two (2) copies of the Articles of Incorporation of Udo Incorporated and the appointment of a registered agent for filing purposes.

Also is a check for \$70 to cover charter tax, filing fees, registered agent filing fee, and a cost of a certified copy of the articles. Please return a certified copy to my attention at the below address:

14904 Oldgate Place Tampa, FL 33624

If you have questions, please do not hesitate to contact me at (813) 968-11142. Thank you for your prompt attention to this matter.

Sincerely,

Kimberly T. Jansen)

FAL MAR 2 2 1995

FILED

Articles of Incorporation of **Udo Incorporated**

96 HAR 18 PH 3:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA

WE THE UNDERSIGNED, natural persons of legal age, acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation for such corporation:

FIRST:

The name of the corporation is Udo Incorporated.

SECOND:

The period of its duration is perpetual.

THIRD:

The purpose(s) for which the corporation is organized are any and all lawful business activities for which corporations may be incorporated under chapter 607 of the Florida Statutes.

FOURTH:

The aggregate number of shares which the corporation shall have authority to issue is one thousand (1000) shares of common stock having a par value of ten dollars (\$10) each.

FIFTH:

The corporation will not commence business until at least one thousand dollars (\$1000) have been received by it as consideration for the issuance of shares.

SIXTH:

Cumulative voting of shares of stock is not authorized.

SEVENTH:

Provisions limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: NONE.

EIGHTH:

Provisions for the regulation of the internal affairs of the corporation are: Governed by the by-laws of the corporation which shall be adopted by a majority of directors.

NINTH:

The address of the initial registered office of the corporation is: 14904 Oldgate Place, Tampa, FL 33624 and the name if its initial registered agent at such address is Kimberly T. Jansen.

TENTH:

Address of the principal place of business is 14904 Oldgate Place, Tampa, FL 33624.

ELEVENTH: The number of directors constituting the initial board of directors of the corporation is two (2), and the names and addresses of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and shall qualify are:

Name

Address

Kimberly T. Jansen Michael U. Jansen 14904 Oldgate Place, Tampa, FL 33624 14904 Oldgate Place, Tampa, FL 33624

The name an 1 address of each incorporator is:

Name

Address

Kimberly T. Jansen Michael U. Jansen 14904 Oldgate Place, Tampa, FL 33624 14904 Oldgate Place, Tampa, FL 33624

IN WITNESS WHEREOF, the incorporator(s) have hereunto set their hands this 15th day of March 1996.

Mee. S_

Kimberley T. Jamen

IN COMPLIANCE WITH SECTION 607.325, FLORIDA STATUTES, THE 96 HAR 18 PH 3: 51
FOLLOWING IS SUBMITTED:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FIRST THAT UDO INCORPORATED WITH ITS PLACE OF BUSINESS AT 14904 OLDGATE PLACE, TAMPA, FLORIDA 33624 HAS NAMED KIMBERLY T.

JANSEN LOCATED AT 14904 OLDGATE PLACE, CITY OF TAMPA, STATE OF FLORIDA AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

MICHAEL U. JANSEN

PRESIDENT MARCH 15, 1996

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

KIMBERLY T. JANSEN MARCH 15, 1996

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.1.1	to new address begin	nning: 1/216/	1961
My Name (Last name, first n	ame, middle initial)	aco	
OLD Complete Street Addre	IN OFFICI BOX OF RUINI HO	te and RR Box	Apl/Bytto #
City or Post Office 15307 C	ARROLLTON	LHNE State	ZIP or ZIP+4 Code
MEW Complete Street Addre	ss or PO Box or Rural Ro	ute and RR Box	Apt/Sulte # 336,24
City or Post Office	ha	State	ZIP or ZIP+4 Code
MEW Telephone Number (Or 9600) Account Number (If applicable	10025735		· · · · · · · · · · · · · · · · · · ·
Signature		Today's	1/12/21/19 Date: Month Day Yo

K51/1