

P96 0000026176
TRANSMITTAL LETTER

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

000001749810
-03/19/96--01130--004
*****78.75 *****78.75

SUBJECT: _____
VON INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: _____
Name (printed or typed)
45 EAST HWY 318

Address
CITRA, FL 32113

City, State & Zip
352 - 595 - 8972

Daytime Telephone number

FILED
96 MAR 19 PM 3:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL MAR 25 1995

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

VON INC.

ARTICLE II PRINCIPAL OFFICE

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

1535 SW ARCHER RD
GAINESVILLE, FL 32608

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GLEND A ADKINS
45 EAST HWY 318
CITRA, FL 32113

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

GLEND A ADKINS
45 EAST HWY 318
CUTRA, FL 32113

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27 day of February, 19 96.

Glenda J. Adkins
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:

VON INC.

2. The name and address of the registered agent and office is:

GLENDA ADKINS

(NAME)

45 EAST HWY 318

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

CITRA, FL 32113

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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 statute 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.

Glenda J. Adkins
(SIGNATURE)

02-27-96
(DATE)