

P96000030642

TRANSMITTAL LETTER

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

4000001766354
-04/02/96--01068--001
*****78.75 *****78.75

SUBJECT: Tropical Magic, 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: JoAnne Wilson
Name (printed or typed)

1644 Center Street
Address

DeLand, Florida 32720
City, State & Zip

(904) 734-3070
Daytime Telephone number

FILED
96 APR - 2 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL APR - 9 1996

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

ARTICLES OF INCORPORATION

FILED
96 APR -2 AM 9:11
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:

Tropical Magic, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1644 Center Street
DeLand, Florida 32720

ARTICLE III SHARES

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

1,000,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JoAnne Wilson
1644 Center Street
DeLand, Florida 32720

FILING FEE: \$70.00

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):

Don Northrup, President/Director
2405 Sandlewood Lane Box M-8
Orange City, Florida 32763

JoAnne Wilson, Secretary/Treasurer
1644 Center Street
DeLand, Florida 32720

William Clyde Busbee II, Director
1963 Summit Blvd.
Pensacola, Florida 32503

Terry DuWayne Busbee Jr., Director
1963 Summit Blvd.
Pensacola, Florida 32503

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

27th day of March, 19 96.



Signature

JoAnne Wilson

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 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: Tropical Magic, Inc.

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

JoAnne Wilson

(Name)

1644 Center Street

(P.O. Box not acceptable)

DeLand, Florida 32720

(City/State/Zip)

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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.

JoAnne Wilson
(Signature)

JoAnne Wilson

3-27-96
(Date)