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DIVISION OF CORPORATION

ACCOUNT NO. : 0021000000032

REFERENCE : 914093 56740

AUTHORIZATION :

Patricia Pajon

COST LIMIT : \$ 122.50

ORDER DATE : April 10, 1996

ORDER TIME : 2:49 PM

ORDER NO. : 914093

000001776050

CUSTOMER NO: 56740

CUSTOMER: Carla Wellborn, Legal Asst
KIMPTON BURKE & WHITE

Suite 100
28059 U.S. Highway 19, North
Clearwater, FL 34621

DOMESTIC FILING

NAME: TAGS PLUS, INC.

EFFECTIVE DATE:

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Victoria L. Perez

EXAMINER'S INITIALS:

TH
4-11-96

ARTICLES OF INCORPORATION
OF
TAGS PLUS, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

TAGS PLUS, INC.

The address of the principal office of this corporation shall be 6399 142nd Avenue, Suite 118, Clearwater, Florida 34620, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 28059 U. S. Highway 19 North, Suite 100, Clearwater, Florida 34621, and the name of the initial registered agent of the corporation at that address is Robert C. Burke, Jr.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. SPECIAL PROVISION

It is the intent of the Incorporator that the corporation will qualify under section 1244 of the Internal Revenue Code.

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of
Corporation Service Company, has hereunto set
their hand and seal of Corporation Service Company
on April 10, 1996.

CORPORATION SERVICE COMPANY

By Karen B. Rozar

Its Agent, Karen B. Rozar

LEL/vlp

**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: TAGS PLUS, INC.

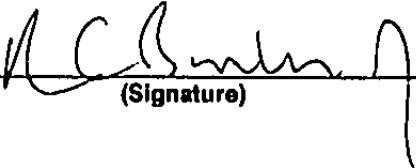
2. The name and address of the registered agent and office is:

ROBERT C. BURKE, JR.
(Name)

28059 U. S. HIGHWAY 19 NORTH, SUITE 100
(P.O. Box not acceptable)

CLEARWATER, FLORIDA 34621
(City/State/Zip)

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.


(Signature)

LAW OFFICES OF

KIMPTON, BURKE & WHITE, P.A.

WILLIAM J. KIMPTON
ROBERT C. BURKE, JR.
LANDRED W. WHITE
RICHARD T. BRIDEN

FAX (813) 796-0909

28059 U.S. HIGHWAY 19 NORTH
SUITE 100
CLEARWATER, FL 34621-2698
TELEPHONE (813) 791-0063

May 3, 1996

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

800001821828
-05/15/96--01025--015
*****35.00 *****35.00

RE: Tags Plus, Inc.
Our File No. 10,056.04.6.000

Gentlemen:


Enclosed is Registered Agent Certificate designating new Registered Agent for the captioned corporation. Please file the same in the records of your office.

Please date stamp the duplicate copy enclosed with the filing information and return in the self-addressed, stamped envelope also enclosed.

Further enclosed is our check in the amount of \$35 covering your filing fees.

Sincerely,

KIMPTON, BURKE & WHITE, P.A.


Robert C. Burke, Jr.

RCB/cgw
Enclosures
cc: Mr. Robert A. Hafer

cgw:96depa01.1tr

FILED
96 MAY 15 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2 Adm
CPG
5/20

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: TAGS PLUS, INC.

1b. The mailing address of the corporation is : 6399 142ND AVENUE, SUITE 118
CLEARWATER, FL 34620

1c. Date of incorporation: APRIL 10, 1996 Document number: P960003120

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

ROBERT C BURKE JR

28059 U S HIGHWAY 19 NORTH SUITE 100

CLEARWATER FL 34621

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

LYNN S HAFER

6399 142ND AVENUE SUITE 118

CLEARWATER FL 34620

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Lynn S. Hafer
(Signature of an officer, chairman or
vice chairman of the board)

5/1/96
(Date)

LYNN S HAFER, PRESIDENT

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Lynn S. Hafer
(Signature of Registered Agent)

5/1/96
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)