

FAX AUDIT # PAGE 01  
H96000005404

1196000005404

**Note:** Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.  
(((119600003404)))

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96 APR 17 PM 4:41  
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4/17

701 N. W. 11TH AVE., SUITE 1100, MIAMI, FL 33136  
(305) 597-3439

**FAX AUDIT #**  
**H96000005404**

# TRANSMITTAL LETTER

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

FILED  
-04/03/96-01476-015  
\*\*\*\$70.00\*\*\*

## SUBJECT:

**THE PINELLAS GROUP INC.**

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

**\$70.00**

Filing Fee



**\$78.75**

Filing Fee  
& Certificate



**\$122.50**

Filing Fee  
& Certified Copy



**\$131.25**

Filing Fee,  
Certified Copy  
& Certificate



## From:

**SEALS N' SIGNATURES**

Name (printed or typed)

6822 22ND AVE N. SUITE 277

Address

ST. PETERSBURG, FL. 33710

City, State & Zip

(813) 367-3459

Daytime Telephone number

*Please type in  
the entire RA  
name.*  
789, 303, 524, 671  
~~2096-4544~~

**D. REGISTER APR 11 1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

April 11, 1996

SEALS N' SIGNATURES, INC.  
6822 22ND AVE N  
SUITE 277  
ST PETERSBURG, FL 33710

SUBJECT: THE PINELLAS GROUP INC.  
Ref. Number: W96000007844

We have received your document for THE PINELLAS GROUP INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your check is being returned as it is not payable to this office. Please make your check payable to the Secretary of State and return it in order to complete your filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6919.

Beth Register  
Corporate Specialist Supervisor

Letter Number: 096A00016622

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:

**THE PINELLAS GROUP INC.**

**ARTICLE II PRINCIPAL OFFICE**

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

Place of Business

**112 7TH STREET EAST  
ST. PETERSBURG FL 33715**

Mailing Address

**112 7TH STREET EAST  
ST. PETERSBURG FL 33715**

**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:

**SEALS N SIGNATURES  
6822 22ND AVE N SUITE 277  
ST. PETERSBURG FL 337110**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

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

FREDERICK ALBERG  
112 7TH STREET EAST  
ST. PETERSBURG FL 33715

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

● Second day of April, 1996.

● Frederick A. Alberg  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

## 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:  
THE PINELLAS GROUP INC.

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

SEALS N SIGNATURES

(Name)

6822 22ND AVE N SUITE 207

(P.O. Box not acceptable)


ST. PETERSBURG FL. 337110

(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 statutes relating to the proper and complete performance of my duties and I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation.*

  
(Signature)

  
(Date)