

JUN 11-96 11:14 AM

P. 1

P9600049920

11/96

11:42 AM

FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM
ELECTRONIC FILING COVER SHEET
TO: DIVISION OF CORPORATIONS FROM: FILING, INC.
DEPARTMENT OF STATE 3732 NW 16TH ST
STATE OF FLORIDA
409 EAST GAINER STREET
TALLAHASSEE, FL 32399

FAX: (904) 922-4800

FT LAUDERDALE FL 33311-

CONTACT: TERESA ROMAN

PHONE: (904) 385-6735

FAX: (904) 385-6761

((H96000008134)))

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: SOUTHERN MANAGEMENT ASSOCIATES, INC.

FAX AUDIT NUMBER: H96000008134

CURRENT STATUS: REQUESTED

DATE REQUESTED: 06/11/1996

TIME REQUESTED: 11:41:54

CERTIFIED COPIES: 1

CERTIFICATE OF STATUS: 0

NUMBER OF PAGES: 3

METHOD OF DELIVERY: *MAIL*

ESTIMATED CHARGE: \$122.50

ACCOUNT NUMBER: 872720000191

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.

((H96000008134)))

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:

Hand for pick up

FILED

96 JUN 12 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DIVISION OF CORPORATIONS

96 JUN 11 PM 12:54

RECEIVED

6/12

196A-1244

196A-254

196000008134

FILED
56 JUN 12 PM 3:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**ARTICLES OF INCORPORATION
OF**

SOUTHERN BUSINESS MANAGEMENT ASSOCIATES

The undersigned, acting as incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I - NAME

The name of the corporation shall be: SOUTHERN BUSINESS MANAGEMENT ASSOCIATES, INC.

ARTICLE II - PRINCIPAL PLACE AND MAILING ADDRESS

The principal place of business shall be 4110 Southpointe Blvd., Suite 108, Jacksonville, Florida 32216 and the mailing address shall be 4110 Southpointe Blvd., Suite 108, Jacksonville, Florida 32216.

ARTICLE III - SHARES

All stock issued by the Corporation shall be common voting stock of a single class. The maximum number of shares of stock which this corporation is authorized to have outstanding at any time is one thousand (1,000) shares having a per value of one cent (\$.01) per share.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and street address of the initial registered agent of the corporation shall be: Ronald Winston Bridges, 4110 Southpointe Blvd., Suite 108, Jacksonville, Florida 32216.

ARTICLE V - BOARD OF DIRECTORS

The business of the corporation shall be managed by its Board of Directors. The initial Board of Directors shall consist of one member whose name and address is as follows:

NAME	ADDRESS
Ronald Winston Bridges	4110 Southpointe Blvd., Suite 108 Jacksonville, Florida 32216

Prepared by: Carolyn Herman, Esq.
1831 N. Third Street
Jacksonville Beach, FL 32250
Florida Bar No. 976563
904-247-9400

196000008134

JUN-11-96 TUE 3:11 PM

P. 3

HP600008/34

ARTICLE VI - INCORPORATOR

The name and street address of the incorporator for these Articles of Incorporation is:
Ronald Winston Bridges, 4110 Southpointe Blvd., Suite 108, Jacksonville, Florida 32216.

The undersigned incorporator has executed these Articles of Incorporation this ___ day of
June, 1996.

Signature: 

Print:

Ronald W. Bridges
Incorporator

HP600008/34

JUN-11-96 TUE 3:12 PM

P. 4

HP600008134

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

Pursuant to the provisions of Sections 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/agent, in the State of Florida.

1. The name of the corporation is: SOUTHERN BUSINESS MANAGEMENT ASSOCIATES, INC.
2. The name and address of the registered agent and office are: Ronald Winston Bridges, 4110 Southpointe, Suite 108, Jacksonville, FL 32216.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE 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: 

Print: Ronald W. Bridges

Date: June 7, 1996

FILED
96 JUN 12 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HP600008134