

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

####122.50 *****122.50

SUBJECT:	(proposed corporate name)	
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Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$________.

FROM:	
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STEVENS, JENNINGS			
1398 NW 474 STREET	= 1 (,) 	ران الأران	· ,
Address FOR FT 33486	Tanal Cara		<u>+</u>
City, State, & Zip	14.1 (2.3) [4.1] (2.3)		
(56/) 39/-8722 Telephone Number		- -	_
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Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

<u>OF</u>

Tr. 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:

5 + O OF BOCA TIME

ARTICLE II PRINCIPAL OFFICE

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

BOCA RATON F/ 33431

ARTICLE III CAPITAL STOCK

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

STEVEN S JENNINGS 1398 NW HTH STREET BOCA RATION FT 33486

ARTICLE V INCORPORATOR(S)

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

STEVEN S JENNINGS
1398 NW 4TH STREET
BOCA RATION, F/ 33486

CERTIFICATE OF DESIGNATION 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, submitts the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Sa D or Boca - Lac
<u> </u>
2. The name and address of the registered agent and office is:
STEVEN S FERRINGS
1398 NW 474 STROET
(P.O. BOX NOT ACCEPTABLE)
- KATON F/ 33486
(CITY/STATE/ZIP)
SIGNATURE COORDONATE RESIDENT DATE 6-12-96
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 565
DATE 6-12-96

REGISTERED AGENT FILING FEE: \$35.00