

P96000079199

TRANSMITTAL LETTER

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

96 SEP 24 PM 1:28
DIVISION OF CORPORATION

FILED
96 SEP 24 PM 1:40
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: B W Associates, Inc.
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 70.00.

FROM: John M. S. Giovannoni
Name
5039-B Louvina Drive
Address
Tallahassee, Florida 32311-8719
City, State, & Zip
(904) 668-5330 extension # 1
Telephone Number

6000001355346
-09/24/96--01146--012
*****70.00 *****70.00

Note: Additional copy of articles is needed only when certified copy is requested.

SEP 24 1996

ARTICLES OF INCORPORATION
OF

B W Associates, Inc.

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:

B W Associates of Tallahassee, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3080 North Fulmer Circle
Tallahassee, Florida 32303

ARTICLE III CAPITAL STOCK

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

John M. S. Giovanni
5039-B Louvinia Drive
Tallahassee, Florida 32311-8719

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

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

John M. S. Giovannoni
5039-B Louvina Drive
Tallahassee, Florida
32311-8719

Harold E. Welch
1215 Leon Avenue # 17
Tallahassee, Florida 32303

Thomas A. Bush
2906 Battle Mountain Road
Tallahassee, Florida

The undersigned have executed these Articles of Incorporation this

20th day of September, 1996.

Thomas A. Bush

Signature/Title

20th day of September, 1996.

John M. S. Giovannoni

Signature/Title

20th day of September, 1996.

Harold E. Welch Jr.

Signature/Title

**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, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

B W Associates of Tallahassee, Inc.

2. The name and address of the registered agent and office is (P.O. Box not acceptable):

John Michael Saffold Giovannoni
5039-B Louvinia
Tallahassee, Florida 32311-8719

SIGNATURE

(CORPORATE OFFICER)

TITLE: Treasurer & Secretary

DATE

20 September, 1996

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

SIGNATURE

DATE

20 September 1996