Produce 343

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

300001965709 -10/04/86--01104--002 -****122.50 ****122.50

SUBJECT: WOOLY BULLY, INC.

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for \$122.50.

FROM: GLEN A. GIBELLINA 3355 17TH STREET

SARASOTA, FLORIDA 34235

TELEPHONE: 941-955-2859

Sincerely, Illen Stibellina

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TALLAHASSEE FI ORING.

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ARTICLES OF INCORPORATION

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

ARTICLE I - NAME The name of the corporation shall be: WOOLY BULLY, INC. ARTICLE II - PRINCIPAL OFFICE The principal place of business and mailing address of this corporations shall be:

3355 17TH STREET SARASOTA, FLORIDA 34235

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time 1,000 AT \$1.00 PAR VALUE is:

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GLEN A. GIBELLINA **3355 17TH STREET** SARASOTA, FLORIDA 34235

ARTICLE V - INCORPORATOR

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

GLEN A. GIBELLINA 3355 17TH STREET SARASOTA, FLORIDA 34235

The undersigned incorporator has executed these Articles of Incorporation this

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:

WOOLY BULLY, INC.

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

GLEN A. GIBELLINA 3355 17TH STREET SARASOTA, FLORIDA 34235

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: Min Mulling

Date: OCT 1, 1996

96 OCT -4 PH 4: 29
SECRETARY OF STATE
TALLAHASSEE FLORIDA