

FL0000090101

TRANSMITTAL LETTER

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

500001927775
-08/21/96--01004--011
*****78.75 *****78.75

PETERS PARTEES INC.

SUBJECT: P.R.T.B. Inc.

(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: PETER ROBB

Name (printed or typed)

2114 GAIL AVENUE, APT. A

Address

JACKSONVILLE.BEACH 32250

City, State & Zip

(904) 655-7138

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 NOV - AM 7:59

FILED

NOTE: Please provide the original and one copy of the articles.

W-17656
KR 8-22
11-4-96



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

August 22, 1996

PETER ROBB
2114 GAIL AVENUE
APT A
JACKSONVILLE BEACH, FL 32250

SUBJECT: P.R.T.'S INC.
Ref. Number: W96000017656

We have received your document for P.R.T.'S INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6932.

Kimberly Rolfe
Document Specialist

Letter Number: 996A00039921



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 29, 1996

PETER ROBB
2114 GAIL AVENUE
APT A
JACKSONVILLE BEACH, FL 32250

SUBJECT: PARTEE'S INC.
Ref. Number: W96000017656

We have received your document for PARTEE'S INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

I tried to call you at (904) 655-7138. The call would not go through.

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) 487-6932.

Kimberly Rolfe
Document Specialist

Letter Number: 996A00039921

ARTICLES OF INCORPORATION

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.

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96 NOV -1 AM 7:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

PETER'S PARTEE'S INC.

ARTICLE II PRINCIPAL OFFICE

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

3948 SOUTH 3rd STREET
317
JACKSONVILLE BEACH, FLORIDA 32250

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: one hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PETER ROBB
2114 GAIL AVENUE
APT 4
JACKSONVILLE BEACH, FLORIDA 32250

ARTICLE V INCORPORATOR(S)

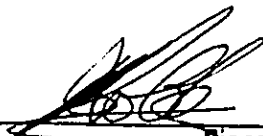
See instructions for officers/directors

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

PETER ROBB
2114 GAIL AVENUE
APT. A
JACKSONVILLE BEACH, FLORIDA 32250

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

14th day of AUGUST, 19 96.

 PRESIDENT.
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
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: PETER'S PARTEE'S INC.

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

PETER ROBB
(NAME)

2114 GAIL AVENUE APT. 1A
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

JACKSONVILLE BEACH, FLORIDA 32250
(CITY/STATE/ZIP)

FILED
96 NOV - 1 AM 7:53
SECRETARY OF STATE
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 am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

8/15/96
(DATE)