# P96 600 102 729

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

		4000020111544
SUBJECT:T B I	E, Inc.	-11/21/9601049018 ****122.50 ****122.50
	corporate name - must include s	
		suffix) 96 TEC
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Enclosed is an original and or	ne (1) copy of the articles	of incorporation and a cheek இதி
for:		9 部
	8.75 X \$122.50	□ \$131.25 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Filing Fee Filing & Certi	Fee Filing Fee ficate & Certified Copy	Filing Fee, Certified Copy
:	A 4 4 4 4 1	& Certificate
	Additional Cop	
FROM: <u>Lec</u>	on T. Butts Jr	
	Name (printed or typed)	Hering 1
321	19 Bluffview Lane	NOT !
	Address	
Bra	indon, FL 33511	·
	City, State & Zip	
(81	13) 310-2088	
***************************************	Daytime Telephona number	
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		296 La
		w96-24972 bxxx
NOTE: Please provide	e the original and <u>one</u>	\ 1 \



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 26, 1996

LEON T. BUTTS JR. 3219 BLUFFVIEW LANE BRANDON, FL 33511

SUBJECT: T B E, INC.

Ref. Number: W96000024972

We have received your document for T B E, INC. and your check(s) totaling \$122.50. 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.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

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) 487-6924.

Sharon Tala
Document Specialist Supervisor

Letter Number: 696A00053599

SECOND FERIOD OF EXISTENCE  The period during which the corporation shall continue is perpetual.  THIRD  REGISTERED OFFICE AND REGISTERED AGENT  A principal  The address of the initial registered office of the Corporation is 33 N Faulkenburg Rd Unit A 108 Tampa, FL 33619  The name and address (if different) of the initial registered agent therein and in charge thereof, upon whom process against the pration may be served, is Laton T. Butts Jr. 33 N Faulkenburg Rd Unit A 108 Tampa, FL 33619  FOURTH  PURPOSE  The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the SHARES  The total authorized capital stock of the Corporation is One. Thousand (1) 1000	CERTIFICATE OF INCORPORATION	(I) (C)
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#### SEVENTH DIRECTORS

The powers of the incorporator are to terminate upon the filing of this Certificate of Incorporation and the name(s) and mail-qualify are as follows:

Leon T. Butts Jr. 3219 Bluffview Lane Brandon, FL 33511

### EIGHTH INDEMNITY

Directors of the corporation shall not be liable to either the corporation or its stockholders for monetary damages for a breach of fiduciary duties unless the breach is one which invokes: (1) a director's duty of loyalty to the corporation or its stockholders; (2) payments of dividends or unlawful stock purchases or redemption by the corporation; or (4) a transaction from which the director

The effective date of this Certificate of Incorporation shall be \_\_\_January 1, 1997

IN WITNESS WHEREOF, the undersigned incorporator has caused this Certificate of incorporation to be executed as of

December 5, 1996

(Incompense)

## 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: THE Associates & Assoc	<del></del>	
2. The name and address of the registered agent and office is:	•	=
Leon T. Buss Jr.	96 DEC 2	SECRETA VISICH OF
33 N Particephere Road Unit A 102	3 AH 8:	NA OE SI SA OE SI
FL 33619	<u>2</u>	ATIONS

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 samutes relating to the proper and complete performance of my duties, and I am fundiar with and accept the obligations of my position as registered agent.

1900

(DATE)