

FLORIDA DIVISION OF CORPORATIONS **PUBLIC ACCESS SYSTEM** ELECTRONIC FILING COVER SHEET

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DIVISION OF CORPORATIONS

DEPARTMENT OF STATE

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(((H97000000108))) DOCUMENT TYPE: FLORIDA CORPORATION OR P.A.

NAME: ALLYN C. McKINNEY, INC. **FAX AUDIT NUMBER: H97000000108**

CURRENT STATUS: REQUESTED

DATE REQUESTED: 01-03-97

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CERTIFICATE OF STATUS: 1

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ARTICLES OF INCOPORATION

OF

ALLYN C. McKinney, 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:

ALLYN C McKinner, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and malling address of the corporation shall be:

P.O. BOX 54-7091. SURFFIDE, FLURIDA 33154-7091

ARTICLE III CAPITAL STOCK

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of initial registered agent is:

ALLYN CHCKINNEY GGGO WEST BAYHARMEDR BAY HARDIR ISLAND, FLORIDA 33154

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ARTICLE V INCORPORATOR(S)

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

ALLYN C McKinney 9660 W. Bay Harbor DR. Bay Harbor, Is. FL 33154

MARY LAURA McKinney 8600 W. BAY Hanhor DR. BAY Hanbor, Is. FL 35154

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

day of January 1957

Colly Alland Vice President

Signature/Title

Signature/Title

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CERTIFICATE OF DESIGNATION

CERTIFICATE OF DESIGNATION 9
REGISTERED AGENT/REGISTERED OFFICE
Pursuant to the provisions of sections 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: Allyn C McLinney C
2. The name and address of the registered agent and office is:
ALCYN C MCKINNEY (NAME)
(P.O. BOX NOT ACCEPTABLE)
((P.O. BOX NOT ACCEPTABLE)
Bay HARLOK. Is Cund FLORISO 33154 (CITY/STATE/ZIP)
Me mil
SIGNATURE (corporate officer)
TITLE Besident
DATE /2/30/96
HAVING BEEN NAME 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 TO OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.
DATE 12-12-19-6