

P97000003760

TRANSMITTAL LETTER

FILED

97 JAN -8 PM 2:29

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

SECRET
TALLAHASSEE, FLORIDA
00002034670--6
-12/20/95--01025--009
*****78.75 *****78.75

SUBJECT: SABAS, INC.
(Proposed corporate name - must include suffix)

W96-27015

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: JOHN M. SABA, JR.
Name (Printed or typed)

1406 KIMLIAR LANE
Address

SARASOTA, FLORIDA 34231
City, State & Zip

941 922-5310
Daytime Telephone number

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

TH
1-14-97



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 26, 1996

JOHN M. SABA, JR.
1406 KIMLIAR LANE
SARASOTA, FL 34231

SUBJECT: SABAS, INC.
Ref. Number: W96000027015

We have received your document for SABAS, 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) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 896A00057272

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: SABAS OF SARASOTA, INC.

ARTICLE II PRINCIPAL OFFICE

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

1406 KIMLIRA LANE
SARASOTA, FL 34231

ARTICLE III SHARES

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

1,000 SHARES \$.10 PER SHARE PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN M. SABA, JR.
1406 KIMLIRA LANE
SARASOTA, FL 34231

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):

John M. Saba, Jr.
Marilyn M. Saba

1406 Kimlira Lane,
1406 Kimlira Lane

Sarasota, Florida 34231
Sarasota, Florida 34231


ARTICLES VI - EFFECTIVE DATE

The effective date of the Corporation is January 2, 1997.


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

2 day of Jan, 1997.

(An additional article must be added if an effective date is requested.)



Signature



Signature

Signature

Notarization is not required

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

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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SECRET
TALLAHASSEE, FLORIDA

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 SABAS OF SARASOTA, INC.

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

JOHN M. SABA, JR.

(NAME)

1406 KIMLIRA LANE

(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

SARASOTA, FL 34231

(CITY/STATE/ZIP)

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.

John M. Saba, Jr.
(SIGNATURE)

1/2/97
(DATE)