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TALLAMASOLE TLORIDA

1- 1. 9.

December 30, 1996

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

RE: OBA Fueling Services, Inc.

Please find enclosed the original and one copy of Articles of Incorporation together with payment in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Please make January 1, 1997, as the effective date of the corporation.

Very truly yours,

Adrian Thompson

OBA Fueling Services, Inc. 770 Airport Rd., Suite 7 Ormond Beach, FL 32174

(904) 673-9862

100002044881---6 -01/03/97--01116--003 ****122.50 ****122.50

20 At 16/17



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 8, 1997

ADRIAN THOMPSON 770 AIRPORT RD, SUITE 7 ORMOND BEACH, FL 32174

SUBJECT: OBA FUELING SERVICES, INC.

Ref. Number: W97000000471

We have received your document for OBA FUELING SERVICES, 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 registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

Please state the effective date in your document.

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) 487-6915.

Pamela Hall Document Specialist

Letter Number: 997A00000941

ARTICLES OF INCORPORATION

	•	of	
		ING SERVICES, INC.	
	(1	name of corporation)	97 JAN -3 AM 9: 41
	signed subscriber(s) to these Articles of on under the laws of the State of Flo		TALLARASULL, FLORIDA
	ARTICL	E I - CORPORATE NAME	
The name	of the corporation is:		
	OBA FUEL	ING SERVICES, INC.	·
	ART	TICLE II - DURATION	1-1-97
This corp	oration shall exist perpetually unless of	dissolved according to Florida law.	The state of the state of
	AR	TICLE III - PURPOSE	
	oration is organized for the purpose of a ates and the State of Florida.	engaging in any activities or busines	s permitted under the laws of the
	ARTIC	LE IV - CAPITAL STOCK	
The corpo	ration is authorized to issue <u>TWO T</u>	HOUSAND shares (2,00	0) of <u>ONE</u>
Dollar(s)	(\$ 1.00) par value	Common Stock, which shall be des	signated "Common Shares."
	ARTICLE V - INITLA	L REGISTERED OFFICE AND A	4 <i>GENT</i>
The princ	ipal office, if known, or the mailing a	adress of the corporation is:	
NAME	OBA FUELING SERVICES.		
ADDRESS	770 AIRPORT RD., SUIT		
CITY	ORMOND BEACH	FLORIDA	ZIP 32174
The name	and street address of the Initial Re	gistered Agent of this Corporation	is:
NAME	ADRIAN THOMPSON		
ADDRESS	770 AIRPORT RD., SUIT	E 7	——————————————————————————————————————
СПУ	ORMOND BEACH	FLORIDA	ZIP 32174
	ARTICLE VI -	INITIAL BOARD OF DIRECTOR	S
increased	oration shall have ONE (or diminished from time to time by t of the initial director(s) of the corpo	the By-Laws, but shall never be les	number of directors may be either is than one (1). The names and
NAME	ADRIAN THOMPSON		
ADDRESS	4 PINE LOOK PASS		
CITY	ORMOND BEACH	STATE FL	ZIP 32174
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CULA		STEATER.	

PAGE 1

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FORM 215: ARTICLES OF INCORPORATION, PAGE 1

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	ADRIAN THOMPSON		· · · · · · · · · · · · · · · · · · ·		
ADDRESS	4 PINE LOOK PASS				
CTTY	ORMOND BEACH	STATE	FL	ZIP 32	174
NAME					
ADDRESS					
CITY		STATE		ZIP	
NAME			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
ADDRESS					
CTTY		STATE		ZIP	
day of * PLEAS AS TH	ESS WHEREOF, the undersigned subs DECEMBER, 19_96 SE MAKE JANUARY 1, 1997 SE EFFECTIVE DATE OF CORPORATION.		se Articles of Inco	orporation this _	30 7H (Séal) _(Seal)
COUNTY	F FLORIDA OF VOLUSIA a Notary Public authorized to take a) SS) cknowledgments in the Stat	te and County set	forth above, per	rsonally
	Signature	KNOWN	To ME Form of Identificat		
mothat <u>Ho</u>	Signature ne and known to be the person(s) who exe RIAN THE PERSON Executed these Articles of son as indicated opposite each name.	fIncorporation, that I relied up	on the form wof i	vho acknowledge	d before te above
	NOTARY RUBBLES STAMP MAL. Notary Public, State of Florida SHIREEN HETRICK My Comm. Exp. Feb. 25, 1997 Comm. No. CC 260728	Witness my hand and offic			

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

FILED

CERTIFICATE OF REGISTERED AGENT

OF

97 JAH -3 AM 9: 41

TALLAHASSEL, FLORIDA

OBA FUELING SERVICES, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)