09700009387

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

Tallahassee, FL 32314				
SUBJECT:	(Proposed corpor	204 Loc ate name - must include suff	ix)	_
			000020695 -01/28/9705 *****78.75	9036 1060001 *****78.75
Enclosed is an original a	nd one(1) copy of the article	s of incorporation and a c	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:	Name (Printed	or typed)	9	무
4	60 POELLINI	<u>Circle</u>	97 JAN 27	FIL SECRETAR 7181011 OF 1
	okomis FL city, State	34275 & Zip		EO STAI
<u>(</u> 9	41) 966-35 Daytime Teleph	5 9 one number		

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

08/12/41

ARTICLES OF INCORPORATION

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 JAN 27 PH 1: 14

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:

R. G. BARON, Inc.

ARTICLE II PRINCIPAL OFFICE

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

460 BELLINI CIRCLE Nokomis, FL. 34275

ARTICLE III SHARES

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

FIVE (5)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PROBERT G. BARDY 460 BELLINI CIRCLE

The present the character

Nokomis, FL. 34275

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):

ROBERT G. BARDA 460 BELLINI CIRCLE Nokomis, Fl 34275

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

16 day of January, 19 97.

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

Q. D. M. Barra

Signature

Signature

Notarization is not required

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 R. G. BARCON, Loc.	
2. The name and address of the registered agent and office is: (NAME)	SECRETARY OF S. SECRETARY OF CORPOR 97 JAN 27 PM
(P. O. Box or Mail Drop Box NOT ACCEPTABLE) NOKOMIS FL 34275 (CITY/STATE/ZP)	ISTE LATIONS

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.