## TRANSMITTAL LETTER Office of Capora instance of Ca

SUBJECT: HERO	S 1971-1 Hole (Proposed corpora	te name - must include suff	ix)	_
Enclosed is an original a	and one(1) copy of the articles	of incorporation and a c	theck for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	ELINDA M. COOK	ADDITIONAL CO	PY REQUIRED	
135	Name (Printed 3 PINEWOOD RO Addre	0AD 50	000020750 -01/31/9701 ******78.75	DO55D 071002 *****78.75
Specie	SONVILLE BEACH City, State	FL 32250 & Zip	SE(	<b>07</b>
<u>904</u>	-249-0761 (0R)90 Daytime Teleph	4-247-531 7 one number	JAN 31 AH 10: CRETARY OF STA AHASSEE FLOR	Į.

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

## ARTICLES OF INCORPORATION

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:

Hero's 19TH Hole, INC.

97 JAN 31 AH ID: 12
SECRETARY OF STATE
TALLAHASSEE FLORING

ARTICLE II PRINCIPAL OFFICE

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

BUSINESS AODRESS! 605 SOUTH PENMAN ROAD.

SACKSONVILLE BEACH, FL 32250

MAILING ADDRESS: 1353 PINEWOOD ROAD

SACKSONVILLE BEACH, FL 32250

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MELINDA M. COOK 1353 PINEWOOD ROAD JACKSONVILLE BEACH, FL 32250

## 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):

MELINDA M. COOK 1353 ANEWOOD ROAD JACKSONVILLE BEACH, FL 32250

The undersigned incorporator(s) has(have) executed these Articles of Incorporation the
3rd day of JANUARY, 1997.
(An additional article must be added if an effective date is requested.)
Melid Mook
Signature
·
Signature
Cimotore

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 Hero's 19TH Hole, INC.		
2. The name and address of the registered agent and office is:	· · · · · · · · · · · · · · · · · · ·	
MELINDA M. COOK (NAME)	SECKET TALLAHA	97 JAN 31
1353 PINEWOOD ROAD (P. O. Box of Mail Drop Box NOT ACCEPTABLE)	∺∹	
SACKSONVILLE BEACH, FL 32250 (CITY/STATE/ZIP)	TATE VRIDA	0:

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.

Melhole M COST 1103/9-7 (DATE)