P9700017811

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

| SUBJECT: | Sanity Skills (Proposed corpora | 100. Ite name - must include suff | īx) | _ |
|----------------------------|------------------------------------|--|--|----------------------------|
| | | 40 | 00020939 -02/21/97010 *****70.00 * | 647 19006 *****70.00 |
| Enclosed is an original ar | nd one(1) copy of the articles | s of incorporation and a | check for: | - |
| \$70.00 Filing Fee | □ \$78.75 Filing Fee & Certificate | □\$122.50 Filing Fee & Certified Copy ADDITIONAL CO | \$131.25 Filing Fee, Certified Copy & Certificate PY REQUIRED | |
| FROM : | odd Stroklein - Name (Printed | Sanity Skills, | | 1 |
| | 36705bornes |) (. | 97 FER 21 | |
| _F+ | City, State | FL 32548 | ſΉ 2: ↓↓ | ·-< |
| | (904) 244-410 Daytime Teleph | | 4- | Ŝ |

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

c/Alarelay

effective date 2/20/97

ARTICLES OF INCORPORATION OF SANITY SKILLS, INC.

CHLED CHARLES ANY OF STATE CHARLES A CHARACTORS

The undersigned hereby makes, subscribes, acknowledges, and files this certificate for the purpose of becoming a corporation for profit under the laws of the State of Florida.

- 1. <u>Name</u>. The name of this corporation (the "Corporation") shall be: SANITY SKILLS, INC.
- 2. <u>Purpose</u>. This Corporation may engage in any activity or business permitted under the laws of the United States and of this State.
- 3. <u>Stock</u>. The capital stock of this Corporation shall consist of One Hundred (100) shares of common stock having a par value of One Dollar (\$1.00) per share.
- 4. Term. This Corporation shall have a perpetual existence.
- 5. Address. The initial street address of the principal office of this Corporation is 367 Osborne Drive, Ft. Walton Beach, FL 32548, and Todd Stecklein, 367 Osborne Drive, Ft. Walton Beach, FL 32548, is hereby designated as resident agent for this Corporation.
- 6.Existence. The date when the corporate existence of this Corporation shall begin is at the time of subscription and acknowledgment of these Articles of Incorporation, that is February 20, 1997.
- 7. Number of Directors. This Corporation shall initially have one (1) director, but the By-Laws of this Corporation may provide for such increase in the number thereof as is authorized by law.
- 8. Directors. The name and street address of the first Board of Directors is as follows:

Name Todd W. Stecklein Street Address
367 Osborne Drive

Ft. Walton Beach, FL 32548

9. <u>Subscriber</u>. The name and street address of the subscriber to this Certificate of Incorporation is as follows:

Name

Street Address

Todd Stecklein

367 Osborne Drive

Ft. Walton Beach, FL 32548

10.Officers. The officers of this Corporation shall be a President and Secretary and such other offices or agents as may be deemed necessary. All officers, agents or employees as may be necessary shall be chosen in such a manner, hold offices for such time, and have such power and duties as may be prescribed by the By-Laws or determined by the Board of Directors. Any person may hold two (2) or more offices.

IN WITNESS WHEREOF, I, the undersigned subscribing incorporator, have hereunto set my hand this 20th day of February, 1997, for the purpose of forming this corporation under the laws of the State of Florida, and I hereby make and file in the office of the Secretary of State of the State of Florida this Cartificate of Incorporation and certify that the facts herein stated are true.

TODD W. STECKLEIN

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 corpo | pration is Sanity Skills, Inc. | |
|--------------------------|--|---------------------|
| 2. The name and address | s of the registered agent and office is: | |
| | Todd Stecklein (NAME) | 97 FED 2 |
| | 367 OSHOCHE WC. (P. O. Box or Mail Drop Box NOT ACCEPTABLE) | 一 PH 200 |
| | Ft. Walton BEACH, FL 32548 (CITY/STATE/ZIP) | EATIONS 12: 1111 |

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.

2/19/97
(SIGNATURE) (DATE)