

TRANSMITTAL LETTER

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

200002122812--5  
-03/24/97--01208--015  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:

Shaw Financial, Inc.

(Proposed corporate name - must include suffix)

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:

Peter M. Shaw (President)  
Name (Printed or typed)

12 Bogey Circle  
Address

New Smyrna Bch., FL 32168  
City, State & Zip

(904) 423-0122  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

97 MAR 24 PM 1:13

FILED

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.

FILED  
97 MAR 24 PM 1:13  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

SHAW Financial, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

12 Bogey Circle  
New Smyrna Beach, FL. 32168

### ARTICLE III SHARES

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

100 (one Hundred)

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Peter M. Shaw  
12 Bogey Circle  
New Smyrna Beach, FL. 32168

**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):

Peter M. Shaw (President)  
12 Bogey Circle  
New Smyrna Beach, FL - 32168

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

20<sup>th</sup> day of March, 19 97.

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

Peter M. Shaw, (President)  
Signature

\_\_\_\_\_  
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 Shaw Financial, Inc.

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

Peter M. Shaw  
(NAME)

12 Borey Circle  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

New Smyrna Beach, FL. 32168  
(CITY/STATE/ZIP)

FILED  
97 MAR 24 PM 1:13  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*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.*

Peter M. Shaw  
(SIGNATURE)

3/20/97  
(DATE)