## P97000038552

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

400002125874--0 -03/27/97--01063--003 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

SUBJECT:	JOZACH (Proposed corpora	T()C. te name - must include suffi	ix)	_
Enclosed is an original a	and one(1) copy of the articles	s of incorporation and a c	heck for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: SHERIDAN F. LANDIS  Name (Printed or typed)  -304 HWAY 19 RAZA South  Address				
_/.	Addre ALATKA, FLOR UT City, State	ss 210A 32177 & Zip	FLORIDA	PH 3: 42
q	704 312 007	72		

Daytime Telephone number

MAR 28 7 BSB

## **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:

JOZACH INC

97 MAR 27 PH 3: 42
SECULIARS SEE, FLORIDA
TABLESSEE, FLORIDA
TABLESSEE, FLORIDA
TABLESSEE, FLORIDA
TABLESSEE, FLORIDA
TABLESSEE
TABLESSE

ARTICLE II PRINCIPAL OFFICE

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

304 Highway 19 PIAZA SOUTH
PALATKA, Fla.
32177

ARTICLE III SHARES

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

10 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SHERIDAN F LANDIS

304 Highway 19 PLAZA South

PALATKA, Fla.

32177

## **INCORPORATOR(S)** ARTICLE V

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SHERIDAN F CANDIS

502 RHINTERE TR.

57. Aug Fla. 32086

MARGARET M. LAWDIS 502 RAINTREE TK 57. Aug. Fla 32086

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

25 day of MARCH, 19 97.

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

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	
	100
2. The name and address of the registered agent and office is:	MAR 2
SKERIDAN F LANDIS	A PH 3:
304 HLDAY 19 PLAZA SOUTH (P. O. Box or Mail Drop Box NOT ACCEPTABLE)	ORIGA ORIGA
PALATKA, FLORIDA 32177	

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.

(SIGNATURE) (DATE)