6/19/97

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX #1 (904)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#1 071001002335

CONTACT: LIDIA FERNANDEZ

PHONE: (305)599-0839

FAX #1 (305)716-0346

NAME: COMMON SENSE MARKETING OF PINELLAS INC.

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...1

PAGES..... 3

CERT. COPIES.....0

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

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(12122)



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 19, 1997

FAS-T CORP. AGNETS INC

SUBJECT: COMMON SENSE MARKETING OF PINELLAS INC

REF: W97000014387

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered office and the registered agent, both at the same Florida streat address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6931.

Becky McKnight Document Specialist FAX Aud. #: H97000010062 Letter Number: 897A00032779 The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: <u>COMMON SENSE MARKETING OF PINELIAS INC.</u>

The principal place of business of this corporation shall be:

775 115 + AVE TREASURE ISLD, FL 33706

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is, authorized to have outstanding at any one time is: 1,000 having a par value of \$1.00.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

PRES. ROBERT L. JACOBI JR , 12001 TBELCHER RD, APT F89, LARGO, FL 3377 V.P PATRICK W. WATROUS, 775 1154 AVE, TREASURE 15LD, FL 33706 SECTY PEGGY J. WATROUS, 775 1154 AVE, TREASURE 15LD, FL 33706

Prepared by:

7EGGY LUATROUS 775 /1544-AVE TREASURE ISLD, FL 33706 (813) 398-2080

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Name:	Office:	Address:	
Robert L. Jacobi, JR	775 1154	LVE TRETISHEE ISLAND	
PATRICK W. WATROW	5		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
PEggy J. WATROLL	5 ·		

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this <u>a(s)</u> day of <u>June</u>, 1997.

Signature(s) of Incorporator(s)

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: Common SENSE MARKETING OF PINEUAS, INC.
2. The name and address of the registered agent and office is: Robert L. Jacobi JR.
TREASURE ISLAND, FL 33706
(City, State, Zip)
SIGNATURE: Colont L. Jacob
TITLE: PRESIDENT
DATE: 6-12-97
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE: Roll of AMAIN ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

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