P97000064 GRIGINA TRANSMITTAL LETTER 5

Department of State

P. O. Box 6327 Tallahassee, FL 32314	,	•			
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for : \$70.00	578.75	\$122.50	6131.25		
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FROM:	Paine	a (printed or typed)	9		
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NOTE: Please provide the original and one copy of the articles.

T. Meyer 4/29/91)

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97 JUL 24 PH 12: 59

ARTICLES OF INCORPORATION

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ALLAHASSEE, FLORIDA

<u>OF</u>

Shamrock of Clearwater, Inc.

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:

SHAMPOCK of Clearwater Inc.

ARTICLE IL PRINCIPAL OFFICE

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

1600 BonAir St. Clearwaten, FL 34615

ARTICLE III CAPITAL STOCK

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

100 Shares N/p

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

James H. Collier SR 110d Fuchsia DR. Holiday, EL 34691

ARTICLE V INCORPORATOR(S)

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

PRINCE BOATENG
1600 BON AM 5+
CleARWATER, FL 34615
TAMARA NONTENG
1600 BON Air ST.
CleArwaten, FL 34615

FILED

CERTIFICATE OF DESIGNATION OF 24 PM 12: 59: REGISTERED AGENT/REGISTERED OFFICE

I'URSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 I LORIDA.

. The name of the corpo	ration is: Shamrock of Class water Inc.
,	
2. The name and addres	s of the registered agent and office is:
Jun	200 H. Collien SR

James H. Collien SR
(Name)

1102 Fuclisia DR
(P.O. Box not acceptable)

Holiday FL 3469/
(City/State/Zip)

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)