P97000082392

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

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SUBJECT: DE CO	E GARDENIA INC.		
· ·	oposed corporate name - must include suffi	x;	
Enclosed is an original a for:	nd one (1) copy of the articles of in	corporation and a check	
\$70.00	\$78.75 \$122.50	\$131.25	
FROM:	Thomas P. 60 Name (printed or typed)	<u>l Deh</u>	
	825 W. AMECIA		
	TAMPA FLA. 3 City, State & Zip	3602	97 SEP 22
	8/3 - 2/8 9000 Daytime Telephone number		ALEL MANY GE
	•• •		- SIAI - SIAI - 3: 2

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

FILED LURETARY OF STATE 13/04 OF CORPORATIONS

ARTICLES OF INCORPORATION

97 SEP 22 PM 3: 21

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BluE GARDENIA, 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 | NAME

The name of the corporation shall be:

DLUE GARDENIA INC.

ARTICLE II PRINCIPAL OFFICE

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

231 MAIN ST. SAFETY HANDOR FLA. 34695

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Thomas P. Golpen

231 MAIN ST. SAFET- HAVBOR IFLA

34695

ARTICLE V INCORPORATOR(S)

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

Thomas GOLDEL 825 W. AMELIA TAMPA FLA. 33602

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT 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 FLORIDA.

1. The name of the corporation is:	BLUE	GARDENIA	Inc	
-	- <u> </u>	<u> </u>		-
		A - 55 1		
2. The name and address of the reg	istered agent an	d office is:		
Thomas	601001		97	
//////////////////////////////////	(Name)		SEP	
825 W. An	nGCIA GA	MPA FLA.	2 22	ARY
(P.O	. Box not acceptat	ole)	1	그분유도
TAMPA	FLA.	33602	3: 2 ₋	A A
	(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)