P91000095808

TRANSMITTAL LETTER

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

			90097/73	7-1016-0 -50 ****122.50
SUBJECT: PB	HOWINGS	ame - must include suf	1	
(Pro	oposed corporate n	ame - must include suf	fix)	
Enclosed is an original a	and one (1) copy	of the articles of i	ncorporation and	l a check
for:	illa cita (1) e ep			
\$70.00	\$78.75	\$122.50	\$131.25	
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
FROM:	Pan S	WATTORD		
,	Name	(printed or typed)		
	1535 S	.E. 15 5 #	20/	
	7	Address		
	FT. M	NURDALU FI ity, State & Zip	ORIDA 33316	97 25 97
	C	ity, State & Zip	ר ר ז	·····································
		24.8509		
	Daytim	e Telephone number		SE Z E D
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NOTE: Please provide the original and one copy of the articles.

nc 11/10/97

FILED

ARTICLES OF INCORPORATION 97 NOV -7 AM 8: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:

PB HOWINGS INC.

ARTICLE II PRINCIPAL OFFICE

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

POBOX 22184 FTLANDURDALU FL 33335

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PAU SWAGGED 1535 S.E. 15⁻⁵⁷ #201 FT LANDERDAN FL 33316

ARTICLE V INCORPORATOR(S)

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

PAU SWAFFERD 1535 S.E. 15-55 #201 FT LANDLEDALU FL 33316

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

28 day of OCT 1997.

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: PD flows 125
2. The name and address of the registered agent and office is:
Pan SWAFFERD
(Name)
1535 5.6.15 SF #201 3 3 D
(P.O. Box not acceptable)
FT LANDURDALU FLORIDA 33316"
(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
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.
28 OCT 97 (Date)