P97000097357

TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327	100002344311- -11/12/97010350 ******70.00 *******7
Tallahassee, FL 32314	
SUBJECT: S.D. Smith, Inc.	
Proposed Corporate Name	
Enclosed is an original and one copy of the Articles of registered agent, and a check for \$70.00. Please return on with the filing date.	Incorporation, a designation of e copy of the Articles stamped
FROM:	97. SEC TALL
Shane Smith	.AR. NO
Name (print or type)	TARY TARY
PO Box 41194	
Address	S = 0
St Pete FL 33743	DA DA
City, State, Zip	
(813) 347-0155	
Area Code and Phone Number (Daytime)	
	Bm0/4/97
* - please mail all info. to the	;
above address as the stra	ect
address will not recieve any	4 1110-
mail delivered,	Who

FILED

ARTICLES OF INCORPORATION NOV 12 PM 1:50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1: NAME The name of the corporation shall be: S. D. Smith, Inc.
ARTICLE 2: PRINCIPAL PLACE OF BUSINESS The principal place of business of this corporation shall be (give street address and zip code): 8267 147 dey Ave, St. fete, FL 33710
ARTICLE 3: SHARES All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any time is:
ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE The name of the initial registered agent is
whose registered office is located at the place of business stated in Article 2 above.
ARTICLE 5: INCORPORATOR
The name and street address of the incorporator to these Articles of Incorporation is: Shane Smith. 8267 Yar Hey Ave. St Pete, FL 33710
The undersigned incorporator has executed these Articles of Incorporation this 10 Day of November, 19 47

Articles of Incorporation Filing Fee — \$35.00

CERTIFICATE OF DESIGNATION OF FILED REGISTERED AGENT/REGISTERED OFFICE PM 1: 50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pursuant to Florida law, the undersigned Corporation organize of Florida submits the following statement in designating the agent, in the State of Florida.	zed under	the laws of	the State
	e register	ed office/re	gistered
The name of the corporation/professional association is:_	S. D.	Sm; th	Inc

2. The nam	e and address of the registered agent and office is:	
	Shane Smith	
Full name		=
<u>826'</u> Address (P.	7 Yardley Auc St Pete FL 33716 O. Box not acceptable)	<u> </u>
City, State, a	and 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.

GNATURE OF REGISTERED AGENT

DATE

Designation of Registered Agent Filing Fee — \$35.00