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SECRETARY OF STATE

DIVISION OF CORPORATIONS

97 NOV 12 PM 2:55

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

000002344180--1 -11/12/37--01017--014 \*\*\*\*122.50 \*\*\*\*122.50

RE: SWEET BRIAR STORAGE CORPORATION

#### Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

SWEET BRIAR STORAGE CORPORATION

Jesall C. Smith

9406 126th Avenue Fellsmere, FL. 32948 (561)571-0299



## ARTICLES OF INCORPORATION

### of Sweet Briar Storage Corporation

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICL	E I - CORPORATE NAME					
The name of the corporation is:						
Sweet Briar Storage Corporation						
ARTICLE II - DURATION  This corporation shall exist perpetually unless dissolved according to Florida law.						
ART	TICLE III - PURPOSE					
The corporation is organized for the purpose of en United States and the State of Florida.	ngaging in any activities or business p	ermitted under the laws of the				
ARTICLE IV - CAPITAL STOCK  The corporation is authorized to issue 100 shares of common stock, par value \$ 1.00 per share.  ARTICLE V - INITIAL PRINCIPAL OFFICE  The street address of the initial principal office and, if different, the mailing address is:						
STREET ADDRESS 9406 126th Avenue						
CITY Fellsmere	FLORIDA	ZIP 32948				
Mailing address, if different						
STREET ADDRESS	-					
		,				
CITY	FLORIDA	ZIP				

## ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Jerald E. Smith Sr.		
ADDRESS -	9406 126th Avenue		
CITY	Fellsmere	FLORIDA	ZIP 32948

	ARTICLE VII - INITIA			umbar of directors may be
either increased or	ion shall have <u>Two</u> (diminished from time to time by the By-Litial director(s) of the corporation are as fo	aws, but shall n		
NAME	Jerald E. Smith Sr.			
ADDRESS	9406 126th Avenue			
CITY	Fel1smere	STATE	Florida	<sup>ZIP</sup> 32948
NAME	Laura L. Schuler			
ADDRESS	9406 126th Avenue	<u></u>	- <u> </u>	-
CITY	Fellsmere	STATE	Florida	ZIP 32948
NAME			- · · ·	- · · · · · · · · · · ·
ADDRESS	–	-		
CITY		STATE		ZIP
NAME	dresses of the incorporators signing these A		poration are as folio	Jws.
NAME	Town ld E Coulth Co			,
ADDRESS -	9406 126th Avenue		-	
CITY	Fellsmere	STATE	Florida	<sup>ZIP</sup> 32948
NAME	Laura L. Schuler	_	-	
ADDRESS	9406 126th Avenue			
CITY	Fellsmere	STATE	Florida	<sup>ZIP</sup> 32948
NAME	·		-	·
ADDRESS	=			
CITY		STATE		ZIP
The undersigned	incorporator(s) have executed these A	rticles of Inco	rporation this	6 TH
	NOVEMBER	, 19 <u>97</u>	<u> </u>	
	∠	Justa	DE fruito	(Signature)
	⊻	Lan	e L. Sol	Oe (Signature)
	_			(Signature)

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

		5			
	Sweet Bria	<del></del>	Corporation)	n	97 NOV 12 PM 2
		(	· .		25 55 5
Pursuant to F	lorida Statutes Se	ctions 48.091 a	nd 607.0501, t	he following is subm	itted:
The above co	rporation, organiz	zed under the la	ws of the State	e of Florida with its re	egistered office
as indicated i	n the Articles of I	ncorporation			
at	9406 126th	Avenue			
	Fellsmere,	Florida 3	2948		
has named	Jerald E.	Smith Sr.		<del></del>	
located at the	aforesaid address	s, as its register	ed agent to acc	cept service of proces	s within this
state.		. <del>.</del>	٠		
Having been	named as register	ed agent and to	accept service	e of process for the ab	oove stated
corporation a	at the place design	ated in this cert	ificate, I hereb	by accept the appoint	ment as regis-
tered agent a	nd agree to act in	this capacity. I	further agree t	o comply with the pro	ovisions of all
statutes relati	ing to the proper a	and complete pe	erformance of	my duties, and I am f	amiliar with
and accept th	e obligations of n	ny position as re	egistered agen	<b>t.</b>	
. 0	100 1	61		11-6-97	
1 Jun	(Signature)	W-fr.		(Date)	
U					