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

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SUBJECT:	(Proposed corp	orate name - must include su	ffix)	
			•	
Enclosed is an original ar	nd one(1) copy of the article	es of incorporation and a	check for :	
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	JAMES W. KNIGHT			
	Name (Printed or typed)			
			是是品	77
	9907 RIVER DRIVE Address			· ·
		Cada OSS		3
	GIBSONTON, FLORID	A 33534		ي _
	City	, State & Zip	ORID	10 d
<u></u>	(813) 248-3877		75 	
	Daytime 7	Telephone number		

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

FILED

ARTICLES OF INCORPORATION

97 DEC -5 PH 3: 18

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

DIVISION OF SOMPURATIONS TALLAHASSEE, FLOR**ida**

ARTICLE I NAME

The name of the corporation shall be: PALMARINA OFFICE PARK, INC.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be: 425 50TH STREET, SOUTH TAMPA, FLORIDA 33619

ARTICLE III SHARES

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

1,000 SHARES

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

JAMES W. KNIGHT 9907 RIVER DRIVE 33675 GIBSONTON, FLORIDA

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

JAMES W. KNIGHT 9907 RIVER DRIVE GIBSONTON, FLORIDA 33534

12/02/97

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent