

97 DEC 15 PM 4: 25

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

200002371892-- 5 -12/15/97--01053--013 ******78.75 ******78.75

(P	Enterprises roposed corporate	name - must include su	ıffix)	
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closed is an original	and one (1) cop	y of the articles of	incorporation ar	nd a ched
: \$70.00	≯ \$78.75	\$122.50	\$131.25	
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
-	•			
				·
FROM:		rvin E. Pittman	200	
	Name	(printed or typed)		
	. 190	00 Hwy 87 Ste I		
•		Address	,	
	Nav	arre, FL 3256	66	
	. 0	ity, State & Zip		•
,	(85	50) 939-3261	P Hall DEC	i. Pon
				16.0

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

FILED

ARTICLES OF INCORPORATION DEC 15 PM 4: 25

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:

Kidney Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4 Duke Ave. Pensacola, FL 32534

ARTICLE III SHARES

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

One Thousand (1000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

John Kidney 4 Duke Ave. Pensacola, FL 32534

ARTICLE V INCORPORATOR(S)

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

Marvin E. Pittman

3650 Bob Tolbert Rd.

Navarre, FL 32566

ARTICLE VI OFFICERS

The names and addresses of the initial Officers of this corporation are:

Name
John Kidney
4 Duke Ave.
President
Pensacola, FL 32534
Secretary-Treasurer

9th	day of _	Decemb	er	, 19_	97.	
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 		S	signature			 -
			٠.		•	
 			ignature		·	 —

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF FILED REGISTERED AGENT/REGISTERED OFFICE REGISTERED AGENT/REGISTERED AGENT/REGISTERED OFFICE REGISTERED AGENT/REGISTERED AGENT/REGISTERED OFFICE REGISTERED AGENT/REGISTERED AGENT/REGISTERED OFFICE REGISTERED AGENT/REGISTERED AGENT/RE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:_	Kidney Enterprises, Inc.		
2. The name and address of the re	gistered agent and office is:		
John Kid	ney		
	(Name)		
4 Duke A	ve.		
(P.C	D. Box not acceptable)		
	(City/State/Zip)		
Having been named as registered a above stated corporation at the pla the appointment as registered age to comply with the provisions of all mance of my duties, and I am familia as registered agent.	agent and to accept service of process for the accept once designated in this certificate, I hereby accept ont and agree to act in this capacity. I further agree statutes relating to the proper and complete perforar with and accept the obligations of my position		
DJ. KJ.	12-9-97		

(Signature)

(Date)