AMPLE LEVIER FTRANSMITTAL)

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

900002396879--6 -01/12/98--01056--011 - ****122.50 ****122.50

Re: <u>UPB ENTERPRISES OF SEBASTIAN</u>, Inc. (Name of 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.

James O. MILLS M. T.

(Individual's Name) SEE PH. D.

TY B' EXTERPRISES OF SEBASTIAN, INC.

(Name of Corporation)

MAILING ADDRESS OF CORPORATION

J&B ENTERPRISES OF SEBASTIAN, FUC

1555 OCEAN COVE ST.

SEBASTIAN FL 32958

PHONE

(561) 589-2702

Area Code Number Ext.

ARTICLES OF INCORPORATION

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TY B ENTERPRISES OF SEBASTIAN INC.

(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:

ARTICLE I - CORPORATE NAME							
The name of ti	ne corporation i						
		J+B	ENTER	EPRISES,	OF SEBASTIAN	INC.	
,					·		
	•	i	TICLE II - 1	DURATION	٠	-	
This corporation	on shall exist ne	rpetually unless di		,	aw.	- 11	
1 vo.po	V P			g			
:	ı	: A !	RTICLE III	PURPOSE	SSEE	ED P	
			engaging in	any activities or b	usiness permitted under the	laws of the	
United States and th	e State of Flori	da. -	•	-	RIDE	က် ကို	
					7		
		_		PITAL STOCK	. 00		
The corporation	n is authorized	to issue <u>500</u>	≥ shares of	common stock, pa	r value \$/.	_ per share.	
		-	-				
The street add	ace of the initio	ARTICLE V Il principal office a		PRINCIPAL OFFIC		:	
The sacet add	CSS Of the little	i principal office a	no, n omer	me mannig ad	uress is.	. = - :	
STREET ADDRESS	5 155	5 OCE	AN	COVE S	ア.	. ခံ နှားဆောက်လောင်း	
			• .				
CITY	SEB	ASTIAN		FLORIDA	ZIP 3.	295P	
Mailing addre	ess, if differen	t					
STREET ADDRESS	S-						
				,		ľ	
CITY	-	į 1,	. 1	FLORIDA	ZIP	. <u>.</u> .	
CITY	ART	ICLE VI - INITIA	L REGIST	·			
, :		ICLE VI - INITIA		ERED OFFICE A		e office is:	
The street add	dress of the in	ICLE VI - INITIA	fice and the	ERED OFFICE A	AND AGENT	ne office is:	
The street add	lress of the in	ICLE VI - INITIA	fice and the	ERED OFFICE A	AND AGENT		
The street add	lress of the in	ICLE'VI - INITIA itial registered of O_M/ Oceaw	fice and the	ERED OFFICE A	AND AGENT	- 13 44 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

INB ENTERPRISES OF SEBASTIAN, INC.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

either increase	operation shall have	2) director es, but shall never	s initially. The numb	er of dire	ectors may be nmes and
NAME	JAMES O. MILLS				4 32
ADDRESS	1555 OCEAN COVE	= ST.			
CITY	SAMES O. MILLS 1555 OCEAN COVE SEBASTIAN	STATE	FL	ZIP	32958
NAME	BRADFORD W.	GRON	QUIST		=
ADDRESS	1002 GENESSEE	AVE.		· · ·	
CITY	BRADFORD W. 1002 GENESSEE SEBASTIAN	STATE	FL	ZIP	32958
NAME					.
ADDRESS		-		·· · .	·
CITY		STATE		ZIP	
The names an	ARTICLE VIII - I				
NAME	JAMES O. MIL	L S	- =		·
ADDRESS	1555 OCERA COM	e Jt_			= 0=C
CITY	Sebaltian	STATE	FL	ZIP 2	525 K
NAME	BRADFORD W.	GRON	QUIST	· .	
ADDRESS	1002 Genevice -	tre			
CITY	Sepastian	STATE	+/-	ZIP	324S1
NAME	- /		-	<u> </u>	
ADDRESS			,	· 	· · · · · · · · · · · · · · · · · · ·
CITY	-	STATE	-	ZIP	
The undersiday of	gned incorporator(s) have executed these Arti	icles of Incorp _, 19_98 Jims (oration this <u>G</u> Thill	(Signature)
	2	Barlo.	d W Stoup		Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

T& B ENTERPRISES OF SET (name of corporation)	BASTIAN,	INC.
(name of corporation)		
,		
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is subn	nitted:	
The above corporation, organized under the laws of the State of Florida with its	registered off	ice
as indicated in the Articles of Incorporation		
at 1555 OCEAN COVE ST. SEBASTIAN, FL. 32958	· ·	•
has named JAMES O. MILLS		-
located at the aforesaid address, as its registered agent to accept service of proce	ss within this ≥∺ %	í
state.	B JAN 12 PH 2: 33 ECRETARY OF STATE LLAHASSEE, FLORIDA	FILED
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 appoin	itment as regi	S-
tered agent and agree to act in this capacity. I further agree to comply with the p	provisions of	all
statutes relating to the proper and complete performance of my duties, and I am	familiar with	1
and accept the obligations of my position as registered agent.		