P988800049727

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

BABZWERKS INC.

900002542129--9 -06/01798-01050--014 *****70.00 *****70.00

(Proposed corpor	ate name - must include suff	fix)
al and one(1) copy of the article	s of incorporation and a	check for :
\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate
	ADDITIONAL CO	PY REQUIRED
KATHY HIGGINBOTHAM		98
Name (Printed	l or typed)	
10045 118TH WAY		<u></u>
Addre	ess	
SEMINOLE FL 33772		<u>କ</u> ୍ଷୟ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ ଓ
	& Zip	
	\$78.75 Filing Fee & Certificate KATHY HIGGINBOTHAM Name (Printed 10045 118TH WAY	Filing Fee & Certificate Filing Fee & Certified Copy ADDITIONAL CO KATHY HIGGINBOTHAM Name (Printed or typed) 10045 118TH WAY Address

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

3

ARTICLES OF INCORPORATION

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:

BABZWERKS INC.

ARTICLE II PRINCIPAL OFFICE

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

10045 118TH WAY N. SEMINOLE FL 33772

DIVISION OF CORPORATIONS

98 JUN-1 PM 3: 01

ARTICLE III SHARES

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

ONE THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KATHY HIGGINBOTHAM 10045 118TH WAY N. SEMINOLE FL 33772

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

KATHY HIGGINBOTHAM 10045 118TH WAY N. SEMINOLE FL 33772

The undersigned incorporator(s) has(have) executed these Articles of incorporation this
1 day of 5000, 1998.
(An additional article must be added if an effective date is requested.)
Signature Signature
Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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_	BABZWERKS INC.	
_		98
2. The name and address of the reg	istered agent and office is:	JUN -
	KATHY HIGGINBOTHAM	2 39
	(NAME)	30
	10045 118TH WAY N.	ONS
(P. O.	Box or Mail Drop Box NOT ACCEPTABLE)	
	SEMINOLE FL 33772	
	(City/State/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.