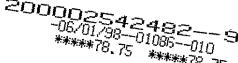
P98000052156

TRANSMITTAL LETTER

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



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SUBJECT:	PLASTICS, INC	3.			
(1	Proposed corporate	name - must include s	uffix)		
Enclosed is an original for :	and one (1) cop	by of the articles of	incorporation an	d a chec	k
\$70.00	x \$78.75	\$122.50	\$131.25		
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
			& Certificate		
•					
				SE	98
FROM:	PADGETT I	BUSINESS SERVIC	CES	至岩	<u>د</u>
	Name	e (printed or typed)		AS	
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45 WEST TARPON AVENUE Address					₹ 0
		V001622			ထ်
	TARPON SI	PRINGS, FL 346			7. 7
	C	City, State & Zip			
	(813) 934	1_7750			
		e Telephone number			
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998A-31227					
998H					
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			W98-	10646	U

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

yu 6/11/98



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 3, 1998

PADGETT BUSINESS SERVICES 45 WEST TARPON AVENUE TARPON SPRINGS, FL 34689

SUBJECT: PLASTICS, INC. Ref. Number: W98000012660

We have received your document for PLASTICS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6067.

Neysa Culligan Document Specialist

Letter Number: 998A00031227

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: JOMAR PLASTICS, INC.

98 JUN 10 AM 8: 57
SECRETARY OF STATE
ANTANASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 10025 BROOKSVILLE, FL 34603

ARTICLE III SHARES

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

FIVE-HUNDRED (500) SHARES COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSEPH P. NUZZI, SR. 45 WEST TARPON AVENUE TARPON SPRINGS, FL 34689

ARTICLE V INCORPORATOR(S)

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

JOSEPH P. NUZZI, SR. 45 WEST TARPON AVENUE TARPON SPRINGS, FL 34689

26TH	day of	MAY	<u> </u>	, 19 ⁹⁸	
0	nanh	PA	ussi		
JOSEPH	p. NUZZI,	SR.	ature /		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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: <u>JOMAR PLASTICS</u>, INC.

2. The name	and address of the registered agent and office is:	98 J SECRI
_	JOSEPH P. NUZZI, SR.	IN TO TASSE
	(Name)	THE D
_	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
	(P.O. Box <u>not</u> acceptable)	S 57
_	TARPON SPRINGS, FL 34689	
_	(City/State/Zip)	-
Having been above stated the appointm to comply wit	named as registered agent and to accept service of proce corporation at the place designated in this certificate, I he ent as registered agent and agree to act in this capacity. It is the provisions of all statutes relating to the proper and continuous and I am familiar with and accept the obligations of	ss for the reby accept further agree omplete perfor-
as registered	agent.	my position