TRANSMITTAL LETTER 9

98 JUN 26 AM 8: 21

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

500002567785--2 -06/22/98--01065--013 ******70.00 ******70.00

SUBJECT: S.k	Corporate Corporate s	ation name - must include suff	Exi	
Enclosed is an origina	t and ano (1) or	5	Fincomoration a	and a check
for: \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	#131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Accounts Name 8668 Pa	ing & Tax Help (printed or typed) rk Blvd, Suit Address	te A	,
	813-	nole, FC, 33 ity, State & Zip 398-601/ • Telephone number	3777	y y 3
	•		F. CHESCES	JUN 2 9 1998

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 23, 1998

ACCOUNTING & TAX HELP INC 8668 PARK BLVD STE A SEMINOLE, FL 33777

SUBJECT: S.K.B. CORPORATION Ref. Number: W98000014431



We have received your document for S.K.B. CORPORATION and your check(s) totaling \$70.00. 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 existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 798A00034595

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

S.K.B. OF PINELLAS CORPORATION



ARTICLE II PRINCIPAL OFFICE

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

694 GREEN VALLEY ROAD PALM HARBOR, FL.34683

ARTICLE III SHARES

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

1000 SHARES NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

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):

ALFRED N.CLARK 694 GREEN VALLEY ROAD D-1 PALM HARBOR, FL.34683

The undersign	gned incorporator(s)	has (have) exec	uted these Articles of Incorporation this
18	oth day of	_JUNE	1998
(An ac	dditional article must	t be added if an	effective date is requested.)
x	Alfred n	· Clork	
	U .	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 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

į	•	The	name	Οİ	the	corporat	tion is:	
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_____S.K.B. OF PINELLAS CORPORATION

2. The name and address of the registered agent and office is:

Accounting & Tax Help, INC. (Name)

8668 PARK BLVD., Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (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.

a Clark

DATE <u>6-18</u>-98

(Signature)
PRESIDENT

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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