PAARMETALETER 394

Department of State Division of Corporations -05/10/99--01079-010 *****78.75 *****78.75 P. O. Box 6327 Tallahassee, FL 32314 Roark Enterprises Inc. II
(Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : □ \$70.00 **□** \$78.75 □ \$87.50 **\$78.75** Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certificate of Status & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Name (Printed or typed) 1316 Oxmoor Court VALRICO, JL 33594 City, State & Zip

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

(813) 685-7796

Daytime Telephone number

DOD 5/14

ARTICLES OF INCORPORATION

ARTICLES OF INCORPORATION
The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation. ARTICLE I NAME The name of the corporation shall be: Roark Enter prises, Inc. II
ARTICLE I NAME
The name of the corporation shall be:
Roark Enter prises, Inc., IL
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
1316 Oxmoor Court
VALRICO, FL 33594"
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100 Shares
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
James B. Roark
1316 Oxmoor Court - VALRICO, FL 33594
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
James B. Roark
1316 OKMOOR COURT
VAIRICO, JL 33594
La B Brand 5-4-99
Signature/Incorporator Date
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(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

5-4-9 9

Date