

TRANSMITTAL LETTER

P99000044/65

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

SUBJECT: ABC FUN IMP, INC.  
(Proposed corporate name - must include suffix)

nnnnnn2872350--0  
-05/12/99--01037--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Robert A. Boller  
Name (Printed or typed)

4416 Battle Creek Ct. E  
Address

Jacksonville, FL 32258  
City, State & Zip

(904) 292-3859, (Home)  
Daytime Telephone number  
(904) 751-4000 EXT 25 (Work)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 MAY 12 PM 12:53

FILED

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

T. SMITH MAY 14 1999

## 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: ABC Fun Jump, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

4416 Battlecreek Ct. E.  
JACKSONVILLE, FL. 32258

### ARTICLE III SHARES

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

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Robert A. Bullen  
4416 Battlecreek Ct. E.

### ARTICLE V INCORPORATOR Jacksonville, FL-32258

The name and address of the incorporator to these Articles of Incorporation are:

4416 Battlecreek Ct. E. Robert A. Bullen  
JACKSONVILLE, FL. 32258

Robert A. Bullen

Signature/Incorporator

5-10-99

Date

(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

Robert A. Bullen

Signature/Registered Agent

5-10-99

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 MAY 12 PM 12:53

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