

TRANSMITTAL LETTER

P99000051458

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

800002893708--6
06/03/99-01038-005
*****70.00 *****70.00

SUBJECT: Patrick W. Robson, Inc.
(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 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: Patrick W. Robson
Name (Printed or typed)

14503 Gulf Boulevard
Address

Madeira Beach, FL 33708
City, State & Zip

(727) 399-9231
Daytime Telephone number

FILED
99 JUN -3 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. SMITH JUN 08 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: Patrick W. Robson Inc.

ARTICLE II PRINCIPAL OFFICE

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

14503 Gulf Blvd.
Madeira Beach, FL 33708

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

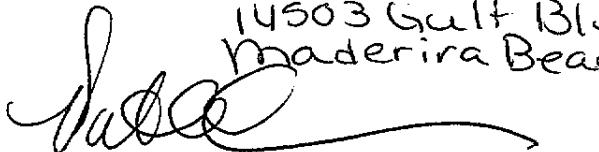
The name and Florida street address of the initial registered agent are:

Patrick W. Robson
14503 Gulf Blvd.
Madeira Beach, FL 33708

ARTICLE V INCORPORATOR

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

Patrick W. Robson
14503 Gulf Blvd.
Madeira Beach, FL 33708



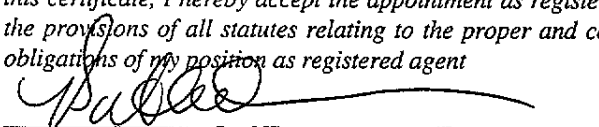
Signature/Incorporator

Patrick W. Robson

6/01/99

Date

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

6/01/99

Date

FILED
99 JUN -3 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA