

P99000064984

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

Re: Incorporation

Please find enclosed the transmittal letter and pertinent information for the incorporation of Johnny Vincent Pine Straw, Inc., along with a check in the amount of \$70.00.

Please send these papers to the address of our bookkeeper:

Nettie Davis, Inc  
1500 S. First St.  
Lake City, FL 32025  
59-3124977

If any further information is needed to complete the incorporation please do not hesitate to contact me.

Thanking you in advance,

*Nettie Davis*  
Nettie Davis

100002932281--4  
-07/15/99-01056-010  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

FILED  
99 JUL 15 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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7-22-99  
KJ

**ARTICLES OF INCORPORATION**

**OF**

*Johnny Vincent Pine Straw, Inc.*

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:

*Johnny Vincent Pine  
Straw, Inc*

**ARTICLE II PRINCIPAL OFFICE**

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

*25215 97th Dr.  
D'Brien, FL 32071*

**ARTICLE III CAPITAL STOCK**

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 ADDRESS**

The name and address of the initial registered agent is:

*Johnny Vincent  
25215 97th Dr.  
D'Brien, FL 32071*

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**ARTICLE V INCORPORATOR(S)**

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

Johnny Vincent  
25215 97<sup>th</sup> Dr.  
D'Brien, IL 32071

The undersigned has(have) executed these Articles of Incorporation this

5<sup>th</sup> day of July, 19 99.

Johnny R Vincent  
Signature/Title

\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Signature/Title

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, 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: Johnny Vincent Pine  
Shaw, Inc.

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

Johnny Vincent  
(NAME)  
25215 97th Dr  
(P.O. BOX NOT ACCEPTABLE)  
D'Brer, FL 32071  
(CITY/STATE/ZIP)

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SIGNATURE Johnny L Vincent  
TITLE Pres  
DATE 7/5/99

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 Johnny L Vincent  
DATE 7/5/99

REGISTERED AGENT FILING FEE: \$35.00