Dennis Brownlee 12249 Spring Hill Dr Spring Hill, FL 34609 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ■ Walk in Pick up time Certified Copy ☐ Will wait Mail out ☐ Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
 Trademark
Other

Examiner's Initials

ARTICLES OF INCORPORATION OF DAVE WADSWORTH, INC.

THE UNDERSIGNED, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, DOES HEREBY ADOPT THE FOLLOWING ARTICLES OF INCORPORATION:

ARTICLE 1 NAME

THE NAME OF THIS CORPORATION IS: DAVE WADSWORTH, INC.

ARTICLE 2
TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE 3 NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE OR TRANSACT IN ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE 4 CAPITAL STOCK

THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THE CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS 1,000 SHARES OF COMMON STOCK HAVING A PAR VALUE OF 10 CENTS PER SHARE. THIS MAY CHANGE SUBJECT TO AUTHORIZATION FROM THE BOARD OF DIRECTORS.

ARTICLE 5 ADDRESS

THE INITIAL STREET ADDRESS OF THE PRINCIPAL OFFICE OF THIS CORPORATION IN THE STATE OF FLORIDA IS: 13042 BALLAST CT HUDSON, FLORIDA 34667. THE CORPORATION MAY FROM TIME TO TIME MOVE THE PRINCIPAL OFFICE TO ANY OTHER ADDRESS.

ARTICLE 6 INCORPORATORS

THE NAMES AND ADDRESSES OF THE INCORPORATORS ARE AS FOLLOWS: DAVE WADSWORTH 13042 BALLAST CT HUDSON, FLORIDA 34667.

ARTICLE 7 DIRECTORS

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DIMINISHED FROM TIME TO TIME BY THE BYLAWS, BUT SHALL NEVER BE LESS THAN ONE. THE NAME AND ADDRESS OF THE INITIAL DIRECTOR OF THIS CORPORATION IS: DAVE WADSWORTH 13042 BALLAST CT HUDSON, FLORIDA 34667.

ARTICLE 8 SUBSCRIBER

THE NAME AND ADDRESS OF THE PERSON SIGNING THESE ARTICLES IS: DAVE WADSWORTH 13042 BALLAST CT HUDSON, FLORIDA 34667.

ARTICLE 9 REGISTERED AGENT

DAVE WADWORTH 13042 BALLAST CT HUDSON, FLORIDA 34667, IS HEREBY DESIGNATED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITH THE STATE OF FLORIDA, FOR AND ON BEHALF OF THIS CORPORATION.

ARTICLE 10 EFFECTIVE DATE

THESE ARTICLES OF INCORPORATION SHALL BE EFFECTIVE UPON THE FILING WITH THE SECRETARY OF STATE OF THE STATE OF FLORIDA.

ARTICLE 11 INDEMNIFICATION

THE CORPORATION SHALL INDEMNIFY ANY OFFICER OR DIRECTOR, OR ANY FORMER OFFICER OR DIRECTOR TO THE FULL EXTENT PERMITTED BY LAW.

ARTICLE 12 AMENDMENT

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY LAW. EVERY AMENDMENT SHALL BE APPROVED BY THE BOARD OF DIRECTORS, PROPOSED BY THEM TO THE STOCKHOLDERS AND APPROVED AT A STOCKHOLDERS' MEETING BY AT LEAST A MAJORITY OF THE STOCK ENTITLED TO VOTE, UNLESS ALL OF THE DIRECTORS AND ALL OF THE STOCKHOLDERS SIGN A WRITTEN STATEMENT MANIFESTING THEIR INTENTION THAT CERTAIN AMENDMENT OF THESE ARTICLES OF INCORPORATION BE MADE.

99 SEP -7 M ID 59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

BEFORE ME, THE UNDERSIGNED AUTHORITY, PERSONALLY APPEARED, DAVE WADSWORTH, TO ME WELL KNOWN TO BE THE INDIVIDUAL DESCRIBED IN AND WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION AND ACKNOWLEDGED BEFORE ME THAT HE EXECUTED THE SAME FOR THE PURPOSES THEREIN EXPRESSED.

Glen F Davis
Notary Public, State of Florida
Ny Comm. Expires Nov 28, 2000
No. CC591853
Bonded Thru: Official Notary Service
1-(800) 723-0121

NOTARY PUBLIC

MY COMMISSION EXPIRES:

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

DAYE WADSWORTH