TRANSMITTAL LETTER

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

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SUBJECT:	Bob Eldridge Ent				
SOBJECI.	(Proposed corpor	rate name - must include suffi	x)	G	
			TALLAHASSE	SECHETARY	三四
Enclosed is an original and o	ne(1) copy of the article	es of incorporation and a c	heck for :		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate	AMII: 27	
FROM:	Robert W. Eldridge Name (Printed or typed)				
	904 West Waters Ave. Suite D Address				-
:	Tampa, Florida 33604 City, State & Zip				-
	(352) 7996 – 799	568-1714 phone number	···		-

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

ARTICLES OF INCORPORATION OF BOB ELDRIDGE ENTERPRISES, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation.

ARTICLE I

NAME

The name of the corporation shall be: Bob Eldridge Enterprises, Inc.

<u>ARTICLE II</u>

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 904 West Waters Ave. Suite D, Tampa Fl. 33604

ARTICLE III

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Hundred (100) Shares.

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered is: Robert W. Eldridge, of 904 West Waters Avenue Suite D, Tampa, Florida 33604

ARTICLE V

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is: Robert W. Eldridge, of 904 West Waters Ave. Suite D, Tampa, Florida, 33604 The undersigned incorporator has executed these Articles of Incorporation this 27 day of September, 1999.

TO: DIVISION OF CORPORATIONS, 409 E. GAINES. TALLAHASSEE, FL. 32399

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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: Bob Eldridge Enterprises, Inc.
 - 2. The name and address of the registered agent and office is:

Robert W. Eldridge 904 West Waters Ave. Suite D Tampa, Florida 33604 99 OCT -4 AM 11:27

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 my duties, and I am familiar with, and accept the obligations of my position as registered agent.

Robert W. Eldridge

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