POSMITAL AND 3557

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

SUBJECT: The	Palm Dottors P= (Proposed corpor	ate name - must include suf	Co Inc	
#		80	00003023 -10/25/99- ****128.75	-01040002
Enclosed is an origin	al and one(1) copy of the articles	s of incorporation and a	check for:	·
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$378.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Cop & Certificate Status PY REQUIRED	of
FROM:	1728 Mahan		WILLAHASSEE, FLÖHDA	APPHOVED APPHOVED PILED 99 0CT 25 AH IO: 23
	850 -567-18	-	A LANGE CO	RECEIV 99 OCT 25 AL

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

ARTICLES OF INCORPORATION

<u>OF</u>

THE PAINT DOCTORS. The Undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorpora-

ARTICLE I NAME

tion.

The name of the corporation shall be: THE PAINT DOCTORS THE PAINT

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1728 MAHAN DR., TALLAHASSEE, FL. 32308

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 OF COMMON STOCK AT \$1.00 PAR VALUE.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is: SHAWN GROSS, 1728 MAHAN DR., TALLAHASSE, FL. 32308

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): SHAWN GROSS, 1728 MAHAN DR. , TALLAHASSEE, FL. 32308

The undersigned I	nas(have) execute	ed these Articles o	f Incorporation this
25th	day of	October .	, 19 [·] 99=
			PRESIDENT
		Mad J	ture/Title
		△ Signa	ture/Title
	_	Signa	ture/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: THE PAINT DOCTORS Palady Sprevice Inc.
2.	The name and address of the registered agent and office is:
	(ALAME)
	1728 MAHAN DR., TALLAHASSEE, FL. 32308
	(P.O. BOX NOT ACCEPTABLE)
	TALLAHASSEE, FL. 32308
	(CITY/STATE/ZIP)
	SIGNATURE (corporate officer) TITLE PRESIDENT DATE 10 -25-49

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 ______