TRANSMITTAL LETTER Department of State Divisions of Corporations P.O. Box 6327 Tallahassee, FL 32314 12/21/99--01034--008 \*\*\*\*\*78.75 \*\*\*\*\*78.75 BERNIE SKAGGS MARKETING, INC. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$87.50 \$78.75 \$78.75 \$87.50 Filing Fee, Filing Fee Filing Fee Filing Fee, & Certified Copy Certified Copy & Certified Copy Certified Copy & Certificate of & Certificate of Status Status ADDITIONAL COPY REQUIRED FROM: Bernard L. Skaggs Name (Printed or typed) 5625 Half Moon Lake Drive Address Tampa, FL 33625 City, State & Zip (813) 961-3642 Daytime Telephone number NOTE: Please provide the original and one copy of the articles.

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## 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: BERNIE SKAGGS MARKETING, INC. ARTICLE II <u>PRINCIPAL OFFICE</u> The principal place of business and mailing address of this corporation shall be: 5625 Half Moon Lake Drive Tampa, FL 33625 ARTICLE III *SHARES* The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES <u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u> The name and Florida street address of the initial registered agent is: Bernard L. Skaggs 5625 Half Moon Lake Drive Tampa, FL 33625 INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: Bernard L. Skaggs 5625 Half Moon Lake Drive Tampa, FL 33625 EFFECTIVE DATE The effective date of this corporation is: January 1, 2000 Signature/Incorpor

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

Dec 16,99

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED COPORATION, 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: | BERNIE SKAGGS MARKETING, INC   | C.                              |                  |   |
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|    |                                 |  |                                 |                  |   |
| 2. | The name and address of the reg | gistered agent and office is:  |                                 |                  |   |
|    | Bernard L. Skaggs               | The state of the s | Z: 4                            | 3                | : |
|    | (Name)                          |  |                                 |                  |   |
|    |                                 | AND THE PARTY OF T | SE S                            | 2<br>E           |   |
|    | 5625 Half Moon La               | ike Drive  |                                 | ₹ U              | * |
|    | (P.O. B                         | ox or Mail Drop Box NOT ACCEPTABLE)  | ORIDA                           | <del></del><br>ა |   |
|    | Tampa, FL 33625                 |  |                                 |                  |   |
|    |                                 | (CITY/STATE/ZIP)   | · 14 *                          |                  | , |

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(SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314