

DIVISION OF CORPORATIONS

NAME DONALD BRAVERMAN & ASSOCIATES, INC.

ADDRESS 6289 W. Sunrise Blvd., Suite # 252

CITY Sunrise

STATE Florida

ZIP CODE 33313

AREA CODE & PHONE NUMBER 305-584-9410

NAME OF CORPORATION Equity Funding, Inc.

**FB9412**

*JK 7/12*

FOR OFFICE USE ONLY

900288711029

DOMESTIC

AMENDMENT

SEARCH

FOREIGN

DISSOLUTION

MERGER

PARTIAL

REINSTATEMENT

MARK

NON-PROFIT

ANNUAL REPORT

RESERVATION

LIMITED PARTNERSHIP

CERTIFICATE  
UNIQUE SEAL

CERTIFIED  
COPY

EFFECTIVE DATE

7-1-82

006 3824 7/02/82

006 3824 7/02/82

006 3824 7/02/82

006 3824 7/02/82

006 3824 7/02/82

Name	<i>DB</i>
Availability	<i>7/12/82</i>
Document Examiner	<i>GJ</i>
Updater	<i>DB 7-8</i>
Updater	<i>DB 7-8-82</i>
Acknowledgment	<i>OK 7/12</i>
W. P. Verifier	<i>JK 1/12</i>

PICKED UP

F89412

ARTICLES OF INCORPORATION

OF

Equity Funding, Inc.

EFFECTIVE DATE  
7.1.82

ARTICLE I - NAME

The name of the Corporation is Equity Funding, Inc.

ARTICLE II - BEGINNING OF CORPORATE EXISTENCE

The existence of this corporation shall commence on the July 1, 1982.

ARTICLE III - PURPOSE

This corporation is organized, pursuant to Florida Status, Chapter 607, for the purpose of transacting any and all lawful business that a corporation may transact pursuant to the laws of the State of Florida.

ARTICLE IV - CAPITAL STOCK

This Corporation is Authorized to issue 1000 shares of One Dollar (\$1.00) Par Value Common Stock.

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation and the name of the initial registered agent of this corporation at such address is as follows:

Registered agent

Donald Braverman

Street Address of  
Registered Office

6289 W. Sunrise Blvd.  
Suite # 252  
Sunrise, Florida 33313

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one director, initially, who shall be Donald Braverman. The number of directors may either be increased or diminished from time-to-time by the by-laws but shall never be less than one.


ARTICLE VII - INCORPORATION

The name and address of the person signing these articles are: Donald Braverman, located at 2031 NW 82nd. Way, Sunrise, Florida 33313.

ARTICLE VIII - INDEMNIFICATION

The corporation shall indemnify all officers and directors, and former officers and directors, to the full extent permitted by law as the law now exists or may be amended hereafter.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 29th. day of June 1982.

  
Subscriber and Registered  
Agent

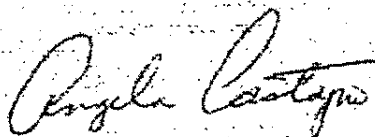
STATE OF FLORIDA

COUNTY OF DADE

BEFORE ME, a notary public authorized to take acknowledgements in the State and County set forth above

personally appeared, Donald Braverman, known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have herunto set my hand and affixed my official seal, in the State and County aforesaid, this 29th day of June 1982.



NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXPIRES JUNE 25 1986  
BONDED THRU GENERAL INS. UNDERWRITERS

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.001, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT Equity Funding, Inc.  
(NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF Sunrise  
(CITY)

STATE OF Florida, HAS NAMED Donald Braverman  
(STATE) (NAME OF RESIDENT AGENT)

LOCATED AT 6289 W, Sunrise Blvd., Ste#252  
(STREET ADDRESS AND NUMBER OF BUILDING, POST OFFICE BOX ADDRESSES ARE NOT ACCEPTABLE)

CITY OF Sunrise, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT  
(CITY)

SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE *Donald Braverman*  
(CORPORATE OFFICER)

TITLE Secretary

DATE July 1, 1982

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS 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.

SIGNATURE *Don Braverman*  
(RESIDENT AGENT)

DATE July 1, 1982

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION  
ANNUAL REPORT  
1983



George Browne  
Secretary of State

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

APPROVED  
FILED

APR 11 9 47 AM 1983

Read Notice and Instructions on Other Side Before Making Entries  
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State, FLORIDA

1. Name and Address of Corporation Principal Office

F89412  
EQUITY FUNDING, INC.  
2 DONALD BRAVERMAN  
6289 W. SUNRISE BLVD. #252  
SUNRISE, FL 33313

Table address is incorrect in any way, with the correct address  
Enter 2 through 3 on line

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number A is NOT Sufficient

Street Address  
P.O. Box No.  
City  
State  
Zip Code

3. Date incorporated or Qualified to Do Business in Florida

07/01/1982

4. Federal Employer's Identification No.

39-280044

5. Date of Last Report

FIRST 1982

6. Names and Street Addresses of Each Officer and Director

Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers)	City and State
BRAVERMAN, DONALD	D/P	2031 NW BEND WAY	SUNRISE, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

BRAVERMAN, DONALD  
6289 W. SUNRISE BLVD. #252  
SUNRISE, FL 33313

8. Name and Address of New Registered Agent

Name  
Street Address (Do NOT use P.O. Box Numbers)  
City, State and Zip Code

9. Pursuant to the provisions of Sections 607.014 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Such change was authorized by resolution duly adopted by its board of directors or:

SIGNATURE

Registered Agent Accepting Appointment

DATE

\$3.00 additional fee required for Registered Agent changes.

10.

See signature restrictions under instructions on reverse side of this form.

I Certify that I am an Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. Further, I Certify that my Signature on This Report shall have the Same Legal Effect as if Made under Oath.

Signature: *Donald Braverman* Date: 8/1/83  
Typed Name of Signing Officer: DONALD BRAVERMAN Title: PRESIDENT Telephone Number: 305-684-9410

COR 600 (1-83)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION  
ANNUAL REPORT  
1984



FLORIDA DEPARTMENT OF STATE  
George F. Winston  
Secretary of State  
DIVISION OF CORPORATIONS

JUN 2 10 29 AM 1984

Read Notice and Instructions on Other Side Before Making Entries  
Filing Fee of \$10 Required -- Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Above is NOT Suitable.	
F89412 EQUITY FUNDING, INC. 1 DONALD BRAVERMAN 6289 W. SUNRISE BLVD. #252 SUNRISE, FL 33313		Street Address P.O. Box No. City State Zip Code	
(If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code)			

3. Date Incorporated or Qualified To Do Business in Florida	07/01/1982	4. Federal Employer Identification Number (FEIN)	59-2202044	5. Date of Last Report	08/11/1983
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6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers)	City and State
1. BRAVERMAN, DONALD	P/O	2031 NW 82ND WAY	SUNRISE, FL 33313
1. BRONCKMAN, DANIELA	P/O	6289 W. SUNRISE BLVD.	SUNRISE, FL 33313
✓ HURD, WAYNE	P/O	6289 W. SUNRISE BLVD.	SUNRISE, FL 33313

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
BRAVERMAN, DONALD 6289 W. SUNRISE BLVD. #252 SUNRISE, FL 33313		Name Street Address (Do NOT use P.O. Box Number) City, State and Zip Code	

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on:

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.  
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.  
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

Signature	<i>Wayne Hurd</i>	Date	4/3/84
Typed Name of Signing Officer	WAYNE HURD	Title	PRESIDENT
		Telephone Number	305-574-9410

11. Should you desire a certificate of status check the box below and include an additional \$5.00 with your payment.

CERTIFICATE OF STATUS DESIRED

\$5 Additional fee required for certificates

CORP 101 84

COMMERCE

ANNUAL REPORT  
1955



Read Notice and Instructions on Other State Before Making Entries  
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

F59412 3  
EQUITY FUNDING, INC.  
T. DONALD BRAVERMAN  
4983 N. UNIVERSITY BLVD., #212  
SUNRISE, FL

33313

4983 N. UNIVERSITY BLVD. #212

Lansdale, Pa.

FL

33321

07/01/1955

59-220204

07/02/1954

Name of Officer	Office	Address	City and State	33313
1 BRAVERMAN, DONALD	S/D	<del>1287 N. SUNRISE BLVD</del> <del>203, NEW YORK WAY</del>	SUNRISE, FL	<del>33313</del>
2 HURD, WAYNE	O/P	<del>1287 N. SUNRISE BLVD</del>	SUNRISE, FL	<del>33313</del>
3 FOS, ALICE	O/P	<del>105 EAST 107 STREET</del>	NEW YORK, NY	<del>10012</del>

Registered Agent Information

Name and Address of Current Registered Agent

Name and Address of New Registered Agent

~~BRAVERMAN, DONALD~~  
~~4983 N. UNIVERSITY BLVD., #212~~  
~~SUNRISE, FL~~

33313

4983 N. UNIVERSITY BLVD., ST# 212

Lansdale, Pa.

FL - 33321

I, the undersigned, do hereby certify that the above named corporation, partnership, or other entity is organized under the laws of the State of Florida, and that the purpose of organizing it is to do business in the State of Florida.

The undersigned is a resident of the State of Florida and is qualified to act as a registered agent for the State of Florida.

1955

DATE

\$3.00 additional fee required for registered agent changes.

I, the undersigned, do hereby certify that I am an officer of the corporation, partnership, or other entity named in this report, and that I am qualified to act as a registered agent for the State of Florida.

*Donald Braverman*  
DONALD BRAVERMAN

SECRETARY

4/11/55

305-749-1000

\$5 additional fee required for a Certificate of Status



DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION  
ANNUAL REPORT  
1986



FLORIDA DEPARTMENT OF STATE  
George Firestone  
Secretary of State  
BUREAU OF CORPORATIONS

1986 MAY -7 10 12 AM

Read Notice and Instructions on Other Side Before Making Entries  
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation (Florida Office)		2. Error Correction Address of Corporation (Florida Office) (Use Number 2 only if 1977 Status Act)	
F89412 EQUITY FUNDING, INC. c/o DONALD BRAVERMAN 1983 N UNIVERSITY DR #38 LALDERHILL, FL 33821		Street Address 21 6289 W. SUNRISE BLVD. P.O. Box No. 22 SUITE 261 City and State 23 SUNRISE, FLORIDA Zip Code 24 33313	

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	07/01/1982	4. Federal Employer Identification Number (FEIN)	59-2202044	5. Date of Last Report	05/02/1985
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6. Names and Street Addresses of Each Officer and Director, as of December 31, 1985				
1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers)	4. City and State	
BRAVERMAN, DONALD	S/O	2031 NW 82ND WAY	SUNRISE, FL	00000
MOSS, TED	D/P	400 EAST 56TH ST	NEW YORK, NY	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
BRAVERMAN, DONALD 1983 N UNIVERSITY DR #38 LALDERHILL, FL 33821		Name 81 Street Address (Do NOT use P.O. Box Number) 82 6289 W. SUNRISE BLVD. #261 City and State 83 SUNRISE FL Zip Code 84 33313	

9. Pursuant to the provisions of Sections 607.004 and 607.007, Florida Statutes, this above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on \_\_\_\_\_.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.025 F.S.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. My signing must be witnessed in Block E1.

Signature of Signing Officer	Date
DONALD BRAVERMAN	5/1/86
Title	Telephone Number
VICE PRES.	305-749-1000

11. Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED  \$5 Additional Fee required for a Certificate of Status