

P03000019956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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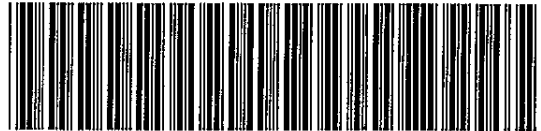
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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

**TRANSMITTAL LETTER**

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

**SUBJECT: SHANDEL CONSULTING, INC.**  
(Proposed corporate name-must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00	\$78.75
Filing Fee	Filing Fee & Certificate

FROM: DONALD WEXLER  
Name(Printed or typed)

8077 SPRINGTREE ROAD  
Address

BOCA RATON, FL 33496  
City, State & Zip

(561)451-0612  
Daytime Telephone number

**ARTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be:

SHANDEL CONSULTING, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

8077 SPRINGTREE ROAD  
BOCA RATON, FL 33496

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5000 common shares, par value \$1.00 per share

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

DONALD WEXLER  
8077 SPRINGTREE ROAD  
BOCA RATON, FL 33496

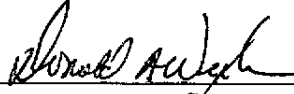
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STATE OF FLORIDA  
DEPARTMENT OF REVENUE

**ARTICLE V  
INCORPORATOR(S)  
See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

DONALD WEXLER  
8077 SPRINGTREE ROAD  
BOCA RATON, FL 33496

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 17 day of Feb, 2003.  
(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required  
CERTIFICATE  
OF DESIGNATION OF  
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: SHANDEL CONSULTING, INC.


2. The name and address of the registered agent and office is:

DONALD WEXLER  
(Name)

8077 SPRINGTREE ROAD  
(P.O. Box or Mail Drop Box **NOT** Acceptable)

BOCA RATON, FL 33496  
(City/State/Zip)

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)

2/17/03  
(Date)

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