

P06000007461

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000014953 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

FLORIDA PROFIT/NON PROFIT CORPORATION

MiCar BocaGrove Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JAN 18 PM 1:38

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

CS. 17

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H060000149533

ARTICLE I NAME

The name of the corporation shall be:

MiCar BocaGrove Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

950 Egret Circle Apt 5405, Delray Beach, FL 33444

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any lawful act or activity

ARTICLE IV SHARES

The number of shares of stock is:

1,000 @ no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Michael Kule, 950 Egret Circle Apt 5405, Delray Beach, FL 33444, Director

Carin Obad, 6308 Terra Rosa Circle, Boynton Beach, FL 33437, Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Michael Kule, 950 Egret Circle Apt 5405, Delray Beach, FL 33444

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jamie K. Hastings, 62 White Street, New York, NY 10013

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator

1/13/06
Date

1/13/06
Date

FILED
06 JAN 18 PM 1:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA