

Florida Department of State  
Division of Corporations  
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## To:

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

## From:

Account Name : JOEL SANDERS & COMPANY, PA  
Account Number : I20040000032  
Phone : (954)916-2000  
Fax Number : (954)916-2021

## FLORIDA PROFIT/NON PROFIT CORPORATION

## BOOK N' IT, INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
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FILE  
SECRETARY OF  
DIVISION OF  
06 APR 28 AM 11:25

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

BOOK N' IT, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7332 SW 25<sup>TH</sup> COURT  
DAVIE, FL 33317

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: N/A

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

**ARTICLE V INITIAL OFFICERS/DIRECTORS (Optional)**

The name(s) and address(es):

PATRICIA LEZACA - PRESIDENT  
7332 SW 25<sup>TH</sup> COURT  
DAVIE, FL 33317

DEBBIE RODRIGUEZ- V-PRESIDENT  
264 SW 166 AVENUE  
PEMBROKE PINES, FL 33027

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

PATRICIA LEZACA  
7332 SW 25<sup>TH</sup> COURT  
DAVIE, FL 33317

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

PATRICIA LEZACA  
7332 SW 25<sup>TH</sup> COURT  
DAVIE, FL 33317

.....  
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.

*Patricia Lezaca*  
\_\_\_\_\_  
Signature/Registered Agent

Date

*Patricia Lezaca*  
\_\_\_\_\_  
Signature/Incorporator

Date

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