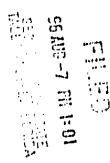
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npire Toll Free: 1-800-432-3028

CORPORATION(S) NAME

10-5	o-Pros I	nc.
		
***	·	
Profit) NonProfit	() Amendment	() Merger
) Foreign	() Dissolution	() Mark
) Limited Partnership) Reinstatement	() Annual Report () Reservation	() Other () Change of Registered Agent
) Certified Copy	() Photo Copies	() Certificate Under Seal
) Call When Ready ➤(Welk In ()	() Call If Problem Will Wait	() After 4:30 () Mail Out ()
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CR2E031 (R8-85)

ARTICLES OF INCORPORATION

FILED

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10-5-PR	os inc	ALL SILVER PROPERTY
	(name of corporation)	······································
The undersigned subscriber(s) to these Article corporation under the laws of the State of Flo	es of Incorporation, natural person(s) cor rida,	npetent to contract, hereby form a
The name of the corporation is:	RTICLE I - CORPORATE NAME	
10-5- PROS INC		
	ARTICLE II - DURATION	
This corporation shall exist perpetually unless	s dissolved according to Florida law.	
	ARTICLE III - PURPOSE	
The corporation is organized for the purpose (United States and the State of Florida.	of engaging in any activities or business	permitted under the laws of the
•	ARTICLE IV- CAPITAL STOCK	
The corporation is authorized to issue	One shares () on tumon Stock, which shall be designated "	f Common Shares".
ARTICLE V - I	NITIAL REGISTERED OFFICE AND A	GENT
The street address of the Initial Registered Ag	ent office and the name of the Initial Reg	gistered Agent at that office is:
NAME Jeff Cohen		
ADDRESS 750 N.E. 195 ST		
CITY N MIAMI BCL	FLORIDA P	ZIP33179
The principal office, if known, or the mailing	address of the corporation is:	
NAME Jeff Coher	***	
ADDRESS 750 N.E. 1955}		
CITY N. MAM BCL	florida 🏳	ZIP 33 17 9

This corporation shall have OOR () directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the Initial director(s) of the corporation are as follows:

NAME Jeff Coher		
ADDRESS 750 NIG 195,81		
CITY N MAMI BEL FI	STATE F/	21P3J/79
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
The names and addresses of the incorporators si	igning these Articles of Incorporation are as t	oltows:
NAME JEFF Cohen		
ADDRESS 750 N.E. 19517		,
CITY N. MIANIL BCL	STATE F	zip33/79
NAME		
ADDRESS		
رين در 		
CITY	STATE	ZIP
	STATE	ZIP
NAME	STATE	ZIP
NAME ADDRESS CITY	STATE STATE	ZIP
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NAME ADDRESS CITY N WITNESS WHEREOF, the undersigned subs	STATE	ZIP orporation this
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CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

96 AUG -7 PH 1:01

CERTIFICATE OF REGISTERED AGENT
OF

MILLS STATE ALL STATE

10-S-	PROSITIC.	
	furnia of correspondent	

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

11 750 N.E 1955	N MIAMI Bel Fl 33/79
has named JePF Coher	
	is Registered Agent to accept service of process within

A. KNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)