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Account Number: 072450003255

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: (305)634-3694

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FLORIDA PROFIT/NON PROFIT CORPORATION

kligman charitable foundation, inc.

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2009 OCT -8 PH 1: C

ARTICLES OF INCORPORATION

OF

KLIGMAN CHARITABLE FOUNDATION, INC.

The undersigned incorporator(s), for the purpose of forming a Not for Profit Corporation under Chapter 617 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be: KLIGMAN CHARITABLE FOUNDATION, INC.

ARTICLE II

The principal place of business and the mailing address of this corporation shall be: 9825 E. CALUSA CLUB DRIVE, MIAMI, FLORIDA 33186

ARTICLE III

The specific purpose for which the corporation is organized: CHARITABLE

ARTICLE IV

The manner in which the directors are elected or appointed will be stated in the Bylaws.

ARTICLE V

The name and street address of the initial registered agent shall be: CRAIG DONOFF, ESQ., CRAIG DONOFF, P.A., 6100 GLADES ROAD, SUITE 301, BOCA RATON, FLORIDA 33434

ARTICLE VI

The name and address of the Officer(s) and Directors shall be:

PRES/DIR

MARCY L. COHEN

9825 E. CALUSA CLUB DRIVE

MIAMI, FL 33186

VP/DIR

SUSAN L. GOLDSLAGER 83 BROOKSIDE TERRACE

NORTH CALDWELL, NJ 07006

DIRECTOR

SELMA KLIGMAN

19707 TURNBERRY WAY 8-H

AVENTURA, FL 33180

ARTICLE VII

The name and street address of the incorporator of these Articles of incorporation shall be:

EMPIRE CORPORATE KIT OF AMERICA, INC. 2444 N.W. 7TH PLACE MIAMI, FL 33127

The undersigned incorporator has executed these Articles of incorporation this 8^{th} Day of <u>OCTOBER</u>, 2009.

INCORPORATOR

Ray Stormont Signing for Empire Corporate Kit of America, Inc.

HO9000216805

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

KLIGMAN CHARITABLE FOUNDATION, INC.
(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.

REGISTERED AGENT

2009 OCT -8 PM 1: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIGE

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