

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Boca Access Group, Inc.

99 AUG 25 AM 8:34

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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-07/06/99--01056--015  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

☒ Art of Inc. File

☐ LTD Partnership File

☐ Foreign Corp. File

☐ L.C. File

☐ Fictitious Name File

☐ Trade/Service Mark

☐ Merger File

☐ Art. of Amend. File

☐ RA Resignation

☐ Dissolution / Withdrawal

☐ Annual Report / Reinstatement

☒ Cert. Copy

☐ Photo Copy

☐ Certificate of Good Standing

☐ Certificate of Status

☐ Certificate of Fictitious Name

☐ Corp Record Search

☐ Officer Search

☐ Fictitious Search

☐ Fictitious Owner Search

☐ Vehicle Search

☐ Driving Record

☐ UCC 1 or 3 File

☐ UCC 11 Search

☐ UCC 11 Retrieval

☐ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

RECEIVED  
99 JUL -6 AM 11: 87



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 6, 1999

CAPITAL CONNECTION, INC.  
417 E. VIRGINIA ST.  
STE. 1  
TALLAHASSEE, FL 32301

SUBJECT: BOCA ACCESS GROUP, INC.  
Ref. Number: W99000015539

We have received your document for BOCA ACCESS GROUP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Randall Purinton  
Document Specialist

Letter Number: 999A0003508

RECEIVED  
99 AUG 25 PM 1:29  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Corrected

**ARTICLES OF INCORPORATION  
OF  
BOCA ACCESS GROUP, INC.**

FILED  
99 AUG 25 AM 8:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a Florida not-for-profit corporation, hereby adopts the following Articles of Incorporation:

**ARTICLE I  
NAME**

The name of the corporation shall be: BOCA ACCESS GROUP, INC..

**ARTICLE II  
PRINCIPAL OFFICE**

The principal name of business and mailing address of this corporation shall be 1660 Timbers Way, Boca Raton, FL 33428.

**ARTICLE III  
PURPOSE**

The specific purpose for which the corporation is organized is to engage in the advocacy of the need for those individuals and/or entities required to comply with the provisions of the American with Disabilities Act to fulfil their obligation under the Americans with Disabilities Act so that those persons disabled can have access to all places of public accommodation.

**ARTICLE IV  
MANNER OF ELECTION OF DIRECTORS**

The initial Directors of this corporation shall be Maureen Henriksen and Carolyn DeMasi, and Albert Carbonari. The manner of which the Directors are elected or appointed is pursuant to the By-Laws of this corporation.

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

The name and Florida street address of initial Registered Agent is: Judd A. Aronowitz, Esq., Fuller, Mallah & Associates, P.A., 1111 Lincoln Road Mall, Suite 802, Miami Beach, FL 33139.

**ARTICLE VI  
INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

MAUREEN HENRIKSEN  
1660 Timbers Way  
Boca Raton, FL 33428

CAROLYN DeMASI  
31577 GUADALAJARA AVE.  
BOCA RATON, FL 33433

By: Carolyn DeMassi  
CAROLYN DE MASSI  
BY: Maureen A. Henriksen  
MAUREEN HENRIKSEN  
Incorporator

DATE: 6/23/99

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 and agree to act in this capacity. I further agree to comply with the provisions of 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.

Judd A. Aronowitz  
JUDD A. ARONOWITZ, ESQ.  
Registered Agent

IN WITNESS WHEREOF, we have hereunto set our hands and seals this 23 day of June, 1999.

Signed, sealed and delivered  
in the presence of:

[Signature]  
STATE OF FLORIDA )  
COUNTY OF DADE ) SS:

Maureen A. Henriksen  
MAUREEN HENRIKSEN  
Carolyn DeMassi  
CAROLYN DE MASSI

NOTARY PUBLIC  
TALLAHASSEE, FLORIDA

99 AUG 25 AM 8:35

FILED

The foregoing instrument was acknowledged before me this 23 day of June, 1999, by MAUREEN HENRIKSEN and JUDD A. ARONOWITZ, ESQ., who are personally known to me and who produced their Florida Drivers' License as identification and they did take an oath.

[Signature]  
Notary Public,  
State of Florida at Large  
My Commission Expires:

