

### Florida Department of State

**Division of Corporations** Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

: (850)922-4001 Fax Number

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)541-3694 Fax Number : (305)541-3770

### FLORIDA PROFIT CORPORATION OR P.A.

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HIGHLAND CAPITALAINC.

| Certificate of Status | 0       |
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# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 17, 2000

EMPIRE

SUBJECT: HIGHLAND CAPITAL, INC.

REF: W00000007126

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The conflicting name is HIGHLAND CAPITAL CORP. F98000003110.

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Angela Revell Document Specialist FAX Aud. #: H00000011843 Letter Number: 900A00014775



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#### ARTICLES OF INCORPORATION

HIGHLAND CAPITAL MANAGEMENT, INC.

These Articles are in compliance with Chapter 607, F.S.

Article I

HIGHLAND CAPITAL MANAGEMENT, INC.

#### Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

#### Article III

The principal place of business and mailing address of this corporation shall be: 260 SE MIZNER BLVD. #609

BOCA RATON, FL 33432

#### Article IV

The general nature of business of this corporation is to transact any and all lawful business.

#### Article V

The number of shares which this corporation shall have authority to issue is 100 shares of common stock having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### Article VI

The name and street address of the initial Registered Agent of this corporation shall be: BRIAN KRINSKY
260 SE MIZNER BLVD. #609
BOCA RATON, FL 33432

PREPARED BY: RAY STORMONT, EMPIRE CORPORATE KIT COMPANY, 1492 WEST FLAGLER STREET, #200, MIAMI, FL 33135, (305) 541-3694

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Article VII

The initial board of Directors shall consist of a total of 2 person(s) and the name and address of the person(s) who are to serve as an initial director(s)

JAIME MAYO VICE PRESIDENT 260 SE MIZNER BLVD. #609 BOCA RATON, FL 33432

#### Article VIII

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

EMPIRE CORPORATE KIT OF AMERICA, INC. 1492 WEST FLAGLER STREET #200 MIAMI, FL 33135

The undersigned has executed these Articles of Incorporation this 20th day of MARCH . 2000.

Ray Stormont, President

Signing for

Empire Corporate Kit of America, Inc.

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### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501. Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

| agent, in the state of Florida.   |
|---|
| agent, in the state of Florida.  First that Highland Capital Management, Inc. |
| First that Florida  |
| ander the laws of the State of  |
| trailing to organize the strain the articles of incorporation has             |
| with its principal office, as indicated in the articles of incorporation has  |
|   |
| named Style 600   |
| located at also Se Midwer Blue Soite 609  Only Beach State of Florida.        |
| City of Bac Jahn County of Palm Beach State of Florida.                       |
| City of Rag laten County or   |
| envice of process within this state.  |
| as its agent to accept service as REGISTERED AGENT AND TO ACCEPT              |
| ACOPORATION AS REGISTER ACOPORATION AS  |

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 AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF CAPACITY. I FURTHER AGREE TO THE PROPER AND COMPLETE ALL STATUTES RELATING TO THE PROPER AND COMPLETE ALL STATUTES RELATING TO THE PROPER AND ACCEPT PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Registered Agen

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