# POODOS 30052

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

500003175318---1 -03/20/00--01064--008 \*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	·= · ·
FROM:	444 OLD CO	BENZ rinted or typed)  OUNTRY ROA	ECKET MR 20 PM 12: THE PROPERTY OF STATE OF STAT
	WELLINGTON	, FLORIDA State & Zip	33414
	(561) 790 Daytime To	)-6929 elephone number	

NOTE: Please provide the original and one copy of the articles.

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## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAMI
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The name of the corporation shall be:

HEIR-A-PARENT, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

444 OLD COUNTRY ROAD WELLINGTON, FLORIDA 33414

# ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000 SHARES AT #.01/SHARE

### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

FRANCES G. BENZ 444 OLD COUNTRY ROAD WELLINGTON, FLORIDA, 33414 LEV INCORPORATOR

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

FRANCES G. BENZ 444 OLD COUNTRY ROAD WELLINGTON, FLORIDA 33414

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 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

Signature/Registered Agent