

CAPITAL CONNECTION, INC.

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

P000000049485
LN Ross of Coral Springs, Inc.

100003257891--5
-05/18/00--01089--021
*****70.00 *****70.00

- ☒ Art of Inc. File *photo*
- ☐ 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
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search *T. SMITH MAY 16 2000*
- ☐ UCC 11 Retrieval
- ☐ Courier

FILED
100 MAY 18 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
00 MAY 18 PM 1:33
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Signature _____

Requested by: *WE*
Name _____ Date *5/18/00* Time *12:27*

Walk-In _____ Will Pick Up _____

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 NAME

The name of the corporation shall be: **LH Ross of Coral Springs, INC.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: **7786 Wiles Road
Coral Springs, Fl. 33065**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
Five Hundred (500) @ One Dollar (1.00) Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: **Salvatore Puccio
7786 Wiles Road
Coral Springs, Fl. 33065**

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: **Salvatore Puccio
7786 Wiles Road
Coral Springs Fl. 33065**

Salvatore Puccio

Signature/Incorporator

5-16-00

Date

FILED
00 MAY 18 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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

Salvatore Puccio

Signature/Registered Agent

5-16-00

Date