# Florida Department of State

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Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

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

# FLORIDA PROFIT CORPORATION OR P.A.

JEFFREY L. FREEMAN, P.A.

| Certificate of Status | · · · · · · · · · · · · · · · · · · · |
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#### ARTICLES OF INCORPORATION

OF

#### JEFFREY L. FREEMAN, P.A.

The undersigned incorporator, for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopts the following

#### ARTICLE I - NAME

The name of the corporation shall be:

Jeffrey L. Freeman, P.A.

#### ARTICLE II - ADDRESS

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

11645 Biscayne Blvd., Stc. 210 Miami, FL 33181

#### ARTICLE III - PURPOSE

The general purpose of this corporation shall be a general law practice and other law related services.

### ARTICLE IV - CAPITALIZATION

The initial capital of this corporation shall be in excess of \$500.00.

#### ARTICLE V - STOCK

The maximum number of shares of capital stock that this corporation is authorized to issue is 500 shares of common stock, having a par value of one (\$1,00) dollar per share. The corporation shall have the power to amend these Articles at any time to provide for different classes of stock and provisions for the preferences, limitations and relative rights in respect to the share of each class.

### <u>ARTICLE VI – INITIAL REGISTERED AGENT</u>

The name and address of the initial registered agent is:

Jeffrey L. Freeman, Esq. 11645 Biscayne Blvd., Ste. 210 Miami, FL 33181

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#### ARTICLE VII - INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors shall be:

Jeffrey L. Freeman, Esq 11645 Biscayne Blvd., Ste 210 Miami, FL 33181

#### ARTICLE VIII - INITIAL OFFICERS

The name and address of the initial Officers of this corporation shall be:

Jeffrey L. Freeman, Esq. - President/Sccretary/Treasurer 11645 Biscayne Blvd., Ste. 210 Miami, FL 33181

#### **ARTICLE IX - INCORPORATORS**

The name and address of the Incorporators to these Articles of Incorporation shall be:

Jeffrey L. Freeman, Esq. 11645 Biscayne Blvd., Ste. 210 Miami, FL 33181

In witness whereof, I have hereunto set my hand and scal this 13th day of June, 2000.

Witness Mugication

AFFREY L. FREEMAN, ESQ.

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, personally appeared Jeffrey I.. Freeman, Esq., known to me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged to me under oath that he signed the foregoing Articles of Incorporation for the purposes and intent therein expressed.

SWORN AND SUBSCRIBED before me, a Notary Public for the State of Florida this 13 day of June, 2000.

My Commission Expires:

Rosetto Figure
Notary Public

Bemadete Keiper

My Commission CC745893

Expires May 27, 2002

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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.

| First that Jeffier L. Ficeman P.A.   |
|--|
| desiring to organize under the laws of the State ofFlorida                   |
| with its principal office, as indicated in the articles of incorporation has |
| named Jeffrey L. Freeman Esq.  |
| located at 11645 Biscayne Blud. Ste. 210                                     |
| City of Miani County of Mani-Dade State of Florida,                          |
| as its agent to account service of process within this state                 |

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.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

SIGNATURE Registered Agent

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