# Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : MASTRIANA & CHRISTIANSEN, P.A.

Account Number: I19990000141
Phone: (954)566-1234

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## FLORIDA PROFIT CORPORATION OR P.A

W. William Govel & Co.

Certificate of Status	1
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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 20, 2000

MASTRIANA & CHRISTIANSEN

SUBJECT: W. WILLIAM GOVEL & CO.

REF: W00000018154

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.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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Becky McKnight Document Specialist FAX Aud. #: H00000038019 Letter Number: 200A00039826

#### ARTICLES OF INCORPORATION

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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:

W. William Covel & Co., Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

515 Seabreeze Blvd.

Ft. Lauderdale, Florida 33316

#### ARTICLE III SHARES

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

1000 shares at a \$1.00 par value

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

F. Konald Mastriana

1500 N. Federal Highway, Ste. 200

Ft. Lauderdale, Florida 33304

#### ARTICLE V INCORPORATOR

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

F. Ronald Mastriana

1500 N. Federal Highway, Stel 200

Ft. Lauderdale Florida

TARY OF STATE HASSEE, FLORIDA

<u>7-19-00</u>

Date

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

Having	; been nan	ed as reg	istered ag	ent and to acc	ept service	of process f	or the abov	e stated o	orporati	ion at the p	lace des	ignated in
this ce	rtificate, I	nereby ac	cept the q	ppointment as	gegistered	agent and a	gree to act i	in this ca <sub>l</sub>	pacity. I	further ag	ree to co	mply with
the pro	visions of	alf statute	es relativo	g to the proper	and comp	lete perform	unce of my	duties, a	nd I am	familiar w	rith and	accept the
obliga	tions of se	plisition a	ıs degişder	ad agens //								

Signature/Registered Agent

7-19-00

Date

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