Holleus & Company Requestors Name  130 W. Sample Lood  Address  City State  Phone  (954) 752-8130	Charter Number Only  A L L D D N C N L Y
CORPORATION(S) NAME	1000034671213 -11/16/0001014010 *****70.00 ******70.00
400 NW 10 Ave a Co	OOMOV 16 MH 10: 42 REPRETARY SERFLORIDA
( ) NonProfit ( ) Amendment  ( ) Foreign ( ) Dissolution	( ) Merger
( ) Foreign ( ) Dissolution  ( ) Limited Partnership ( ) Annual Report ( ) Reinstatement ( ) Reservation	( ) Merger  ( ) Mark  ( ) Other ( ) Change of Registered Agent ( ) Certificate Under Seal ( ) After 4:30 ( ) Mall Our
( ) Certified Copy ( ) Photo Copies	( ) Certificate Under Seal \( \frac{1}{2} \)
( ) Call When Ready ( ) Call If Problem ( ) Pick Up	( ) After 4:30 02 02 02 02 02 02 02 02 02 02 02 02 02
Name Availability Document Examines  Updater  Verifier  Acknowledgment	

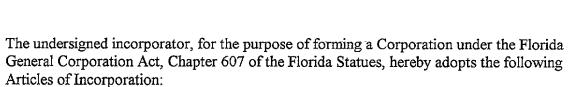
CR2E031 (R8-85)

W.P. Verifier

#### ARTICLES OF INCORPORATION

OF

#### 900 NW 10 AVE. CORP.



#### ARTICLE ONE

#### CORPORATE NAME

The name of the Corporation shall be:

## 900 NW 10 AVE. CORP.

#### ARTICLE TWO

## **DURATION**

The term of existence of the Corporation is perpetual.

### ARTICLE THREE

#### **PURPOSE**

The Corporation may transact any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

#### ARTICLE FOUR

## CAPITAL STOCK

The aggregate number of shares which the Corporation has authority to issue, is 500 Shares, all of which shall be common Shares with \$ 1.00 Par value.

#### ARTICLE FIVE

#### PLACE OF BUSINESS

The street address of the principal place of business is
10177 NW 17 Street Coral Springs, FL 33071

#### ARTICLE SIX

## REGISTERED OFFICE

The street address of the initial registered office of the Corporation is

10177 NW 17 Street Coral Springs, FL 33071

and the name of the initial registered agent at such address is

Ron Pacini

#### ARTICLE SEVEN

#### **BOARD OF DIRECTORS**

The number of members of the Board of Directors may be changed from time to time as provided by the By-Laws of the Corporation as adopted by the stockholders; but, in no event, shall the Board of Directors consist of less than one (1) member at any time.

## ARTICLE EIGHT

#### INITIAL DIRECTORS

The initial Board of Directors shall consist of one (1) member who shall hold office until the first annual meeting of the Corporation and whose name and address is as follows:

Ron Pacini 10177 NW 17 Street Coral Springs, FL 33071

# ARTICLE NINE

# INCORPORATOR

The name and address of each incorporator executing the Articles of Incorporation is as follows:

Ron Pacini 10177 NW 17 Street Coral Springs, FL 33071

## ARTICLE TEN

#### COMMENCEMENT DATE

The Corporation shall be deemed to commence its existence upon the date the Charter Number is assigned to the Corporation by the Secretary of the State of Florida.

IN WITNESS WHEREOF, I have subscribed my name as Incorporator of the Corporation this loth Day of No V., 2000.

STATE OF FLORIDA )
SS
COUNTY OF BROWARD)

BE IT REMEMBERED that on this day, before me, a Notary Public, duly authorized in the State and County named above to take acknowledgments, personally appeared to me known so be the person described as Incorporator in the foregoing Articles of Incorporation, and he/she acknowledged before me that he/she executed said Articles of Incorporation.

WITNESS my hand and official seal in Coral Springs, Florida this loth day of Nov., 2000.

My Commission Expires:

OFFICIAL NOTARY SEAL
KELLI SWIFT
COMMISSION NUMBER
CC692205
MY COMMISSION EXPIRES
OFFICIAL NOTARY SEAL
KELLI SWIFT
COMMISSION NUMBER
CC692205
MY COMMISSION EXPIRES
OCT. 27,2001

Notary Public

Kelli

## CERTIFICATE OF DESIGNATING RESIDENT

## AGENT FOR SERVICE OF PURPOSE

Pursuant to Chapter 48.091, Florida Status, the undersigned hereby designates as its Resident Agent to accept service of process within this State.

Incorporator

The undersigned hereby accepts the foregoing designation of Resident Agent for service of process with the State of Florida, and agrees to comply with the provisions of the law applicable to said designation.

Agent

OO NOV 16 AM 10: 42
SECRETARY OF STATE
TALLAHASSEE FLORIDA