Division of Corporations

Page 1 of 2

201000098103

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000028124 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:	
	Division of Corporations
	Fax Number : (850)922-4001

From:

Account Name : INCORPORATETIME.COM, INC. Account Number : I19990000221 Phone : (631)224-9004 Fax Number : (631)224-7979

FLORIDA PROFIT CORPORATION OR P.A.

FOXWHITE & ASSOCIATES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

B. McKnigi: MAR 1 9 2001

PH 2:

г С

H01000281245

ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION 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 CORPORATION SHALL BE:

FOXWHITE & ASSOCIATES, INC.

ARTICLE IIPRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

15 MIRAMAR RD STUART FL 34996-6701

ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS: 2,000 SHARES AT \$.01 PAR VALUE

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address of the initial registered agent are:

LOUIS VOLPE 15 MIRAMAR RD STUART FL 34996-6701

ARTICLE V: INCORPORATOR: The name and address of the Incorporator to these Articles of Incorporation are:

KERRY WALSH, INCORPORATETIME.COM, INC.

35-37 CARLETON AVENUE, ISLIP TERRACE, NY 11752

Kerry Walsh, Incorporator

Having been named registered agent and to accept service of process for the above stated corporation as 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 familiar with and accept the obligations of my position as registered agent.

egistered Agent

<u>3/14/20</u>01 Date

Date

H010000281245

0

PH 2: