

Division of Corporations

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Account Name : WARD, DAMON & POSNER, P.A.
Account Number : 072262000447
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FLORIDA PROFIT CORPORATION OR P.A.

NORTHLAKE CENTER, INC.

Certificate of Status	1
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**ARTICLES OF INCORPORATION OF
NORTHLAKE CENTER, INC.**

THE UNDERSIGNED, acting as incorporator of a Corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such Corporation:

ARTICLE I - NAME

The name of this Corporation is: NORTHLAKE CENTER, INC.

ARTICLE II - DURATION

The duration of this Corporation is perpetual.

ARTICLE III - PURPOSE

The purpose for which this Corporation is organized is to engage in any lawful act or activities for which corporations may be organized under the laws of the State of Florida.

ARTICLE IV - MAILING ADDRESS OF CORPORATION

The mailing address of the business is 4415 Westroads Drive, West Palm Beach, Florida 33407 and the principal place of business of this Corporation is 4415 Westroads Drive, West Palm Beach, Florida 33407.

ARTICLE V - STOCK

The aggregate number of shares which this Corporation shall have authority to issue is 1,000 shares of common voting stock.

Prepared by: Michael J Posner, 4420 Beacon Circle, Suite 100
West Palm Beach, Florida 33407

Bar No: 525685 ♦ Phone: 561/842-3000

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ARTICLE VI - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of this Corporation's initial registered office in Florida is 4420 Beacon Circle, Suite 100, West Palm Beach, Florida 33407 and the name of its initial registered agent at that address is Michael J Posner, Esq.

ARTICLE VII - INCORPORATOR

The name and address of the incorporator is:

<u>Name</u>	<u>Address</u>
Michael J Posner	4420 Beacon Circle, West Palm Beach, Florida 33407

DATED this 30th day of March, 2001



Michael J Posner, (Incorporator)

STATE OF FLORIDA; COUNTY OF PALM BEACH)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Michael J Posner, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed. WITNESS my hand and official seal in the County and State last aforesaid this 30th day of March, 2001.

Notary Public State of Florida at Large

Sign: _____

My Commission Expires: _____

Print: _____

Prepared by: Michael J Posner, 4420 Beacon Circle, Suite 100
West Palm Beach, Florida 33407

Bar No: 525685 ♦ Phone: 561/842-3000

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**CERTIFICATE DESIGNATING PLACE OF
BUSINESS OR DOMICILE FOR THE SERVICE
OF PROCESS WITHIN THIS STATE NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED**

ACKNOWLEDGMENT:

Having been named to accept service of process for NORTHLAKE CENTER, INC., at the initial registered office of the Corporation in this State designated in its Articles of Incorporation, I hereby accept to act in this capacity and agree to comply with the provisions of Section 607.0505 Florida Statutes.

Date: March 30, 2001



Michael J Posner

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