Division of Corporations

# Florida Department of State

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

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# FLORIDA PROFIT CORPORATION OR P.A

Anderson & Associates, Inc.

Estimated Charge	\$87.50
Page Count	03 (4)
Certified Copy	1
Certificate of Status	1

B. McKnight WAY 0 1 2001

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

# Anderson & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Anderson & Associates, Inc. 119-B NE 2nd Avenue Hallandale, FL 33009

#### ARTICLE III SHARES

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

1500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Amanda L. Anderson 119-B NE 2nd Avenue Hallandale, FL 33009 O1 MAY -1 AM 9: 51
SECRETARY OF STATE
AND ASSEE, FLORIDA

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

# ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Amanda L. Anderson 119-B NE 2nd Avenue Hallandale, FL 33009

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this	

30th day of **April** 2001.

Amanda L. Anderson - Signature

Amanda L. Anderson

SIGNATURE

(Date)

# CERTIFICATE OF DESIGNATION OF 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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Anderson & Associates, Inc.		
2. The name and address of the registe	red agent and office is:	٠	
	Amanda L. Anderson	_	
	Name		
	119-B NE 2nd Avenue	_	
	(P.O. Box or Mail Drop Box NOT Acceptable)		
	Hallandale, FL 33009	_	
	(City / State / Zip)		
corporation at the place designated agent and agree to act in this capac	gent and to accept service of process for the above stated in this certificate, I hereby accept the appointment as reginity. I further agree to comply with the provisions of all the performance of my duties, and am familiar with and accepted agent.	statutes  pt the  O1 MAY - 1  SECRETARY  SECRETARY	
amende L'anders	April 30, 2001	•	