

## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : CAPITAL CONNECTION, INC.

Account Number : 120000000257 Phone : (850)224-8870 Fax Number : (850)222-1222 01 SEP -6 PM 1: 16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# FLORIDA PROFIT CORPORATION OR P.A.

Andrew H. Bate, P.A.

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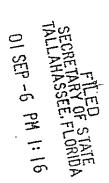
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# ARTICLES OF INCORPORATION

**OF** 

## Andrew H. Bate, P.A.



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 is Andrew H. Bate, P.A. The specific nature of business of this professional association is the practice of law.

## ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 9905 SW 68 Court, Miami, FL 33156.

## ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

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### ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Andrew H. Bate, 9905 SW 68 Court, Miami, FL 33156.

#### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is President, Treasurer, Director: Andrew H. Bate, 9905 SW 68 Court, Miami, FL 33156.

The undersigned has executed these Articles of Incorporation this 6th day of September 2001.

"Capital Connection, Inc. by Stacey Legget, Client Representative"

Stacey Logott

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# CERTIFICATE OF DESIGNATION REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1.	The	name of ti	de corp	oration	ic:/	tudnew t	1. Bate	. P.A
z.	The	name and	street	address	of the	registered	agent an	d office
		9905 Migmi	500	62	<u>c</u> .			

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT 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 AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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