

POLLACK 99050

LAZARUS CORPORATE FILING SERVICE

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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

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-10/11/01--01033--015  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. POLLACK & CO, INCORPORATED
- 2.
- 3.
- 4.

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

RECEIVED  
01 OCT 11 AM 10:52  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of P.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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01 OCT 11 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**FOR**  
**POLLACK & CO., INCORPORATED**

**FILED**  
01 OCT 11 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned, acting as incorporator(s) of a Corporation pursuant to Chapter 621 Florida Statutes, adopt(s) the following Articles of Incorporation.

**ARTICLE I- NAME**

The name of the Corporation shall be:

**POLLACK & CO., INCORPORATED**

**ARTICLE II- PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

9680 SW 77<sup>th</sup> Street  
Miami, Florida 33173

**ARTICLE III- CORPORATE DURATION**

The duration of the Corporation is to be perpetual.

This Instrument prepared by:  
EDUARDO CANTERA, ESQ.  
1762 Coral Way  
Miami, Florida 33145  
FBN: # 154990  
TEL: (305) 442-4343  
FAX: (305) 285-2884

#### **ARTICLE IV – PURPOSE**

The Corporation may engage in any activity or business permitted under the Laws of the State of Florida.

#### **ARTICLE-V CAPITALIZATION**

The aggregate number of shares which the Corporation is authorized to issue is 100 Shares. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

Babara Pollack - Shall own 80%

Henry Pollack - Shall own 20%

#### **ARTICLE VI- DIRECTORS**

The number of Directors constituting the initial Board of Directors of the Corporation shall be two (2):

Henry Pollack      President

Barbara Pollack      Vice President

#### **ARTICLE VII- INCORPORATORS**

The name and address of the Incorporators are:

##### **NAME**

##### **ADDRESS**

Henry Pollack

13836 SW 16<sup>th</sup> Terr.  
Miami, Florida 33175

Barbara Pollack

9860 SW 77<sup>th</sup> Street  
Miami, Florida 33173

**ARTICLE VIII- INDEMNIFICATION**

This Corporation shall indemnify and may insure it's Officers and Directors to the fullest extent permitted by Law.

The Undersigned Incorporator(s) has (have) executed these Articles of Incorporation this 10 day of OCTOBER 2001.

Signature of the Incorporators



Henry Pollack - President



Barabra Pollack - Vice President

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of sections 621, Florida Statutes, the undersigned 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 the corporation is:

POLLACK & CO., Incorporated

2. The name and address of the registered agent and office is:

BARBRA POLLACK-DICK  
9680 SW 77 ST.  
MIAMI FL 33173

HAVING BEEN NAMED AS REGISTERED AGENT AND 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 POSITIONS AS REGISTERED AGENT.

Signature

*Barbra Pollack-Dick*

Date

10-10-07

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