

Division of Corporations

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**PO1000106214**

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**The Disabled Veterans and Handicapped Workshop, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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**ARTICLES OF INCORPORATION**

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 shall be:

The Disabled Veterans and Handicapped Workshop, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

324 NE 19<sup>th</sup> Avenue  
Deerfield Beach, FL 33441

**ARTICLE III SHARES**

The number of shares that this corporation is authorized to have outstanding at any one time is :  
1000 shares

**ARTICLE IV DIRECTORS**

The number of directors constituting the initial board of directors is two (2), and the name and address of the person or persons who are to serve as directors until the first annual meeting of the shareholders or until their successors are elected and qualified are:

Starr CZ-Brown  
324 NE 19<sup>th</sup> Avenue  
Deerfield Beach, FL 33441

Mitchell Brown  
324 NE 19<sup>th</sup> Avenue  
Deerfield Beach, FL 33441

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the initial registered agent are:

Starr CZ-Brown  
324 NE 19<sup>th</sup> Avenue  
Deerfield Beach, FL 33441

**ARTICLE VI INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

Mitchell Brown  
324 NE 19<sup>th</sup> Avenue  
Deerfield Beach, FL 33441

Mitchell Brown  
Signature/Incorporator

11/2/01  
Date

Having 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.

[Signature]  
Signature/Registered Agent

11/2/01  
Date

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