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Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

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To: Division of Corporations  
Fax Number : (850)205-0381

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

## FLORIDA PROFIT CORPORATION OR P.A.

LIPS &amp; MCCLERNON, P.A.

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Lips &amp; McClernon, P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

17071 W. Dixie Hwy., North Miami Beach, FL 33160

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide all the services of a professional full service accounting firm. The corporation may exercise all powers conferred/available to it by law.

**ARTICLE IV SHARES**

The number of shares of stock is:

100 (one hundred)

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Alan Lips, President/Treasurer

Robert McClernon, Vice-President/Secretary

**ARTICLE VI REGISTERED AGENT**The name and Florida street address of the registered agent is:

Alan Lips

17071 W. Dixie Hwy., North Miami Beach, FL 33160

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Alan Lips

17071 W. Dixie Hwy., North Miami Beach, FL 33160

\*\*\*\*\*  
 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
 Signature/Registered Agent ALAN LIPS

  
 Date

  
 Signature/Incorporator ALAN LIPS

  
 Date

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