FILED

02 APR 15 PM 2:07

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SECRE, A GERSTATE TALLAHASSEE, FLORIDA

\*\*\*\*\*87.50 \*\*\*\*\*87.50

**SUBJECT:** ROXBOROUGH ENTERPRISE, INCORPORATED (Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

**□**\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

CLAUDETTE M. ELLIS FROM: Name (Printed or typed) 2641 MADISON WAY Address MIRAMAR, FLORIDA 33025 City, State & Zip

(954) 538-0815.

Daytime Telephone number

## ARTICLES OF INCORPORATION

FILED

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

02 APR 15 PM 2:07

SECOLARIA DE STATE

NAME ARTICLE I

The name of the corporation shall be:

ROXBOROUGH ENTERPRISE, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

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

2641 MADISON WAY

MIRAMAR, FLORIDA 33025

ARTICLE III

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

FIVE HUNDRED @ \$1.00 PAR VALUE

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

\_CLAUDETTE M. ELLIS \_2641 MADISON WAY

MIRAMAR, FLORIDA 33025

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

CLAUDETTE M. ELLIS 2641 MADISON WAY \_MIRAMAR, FLORIDA 33025

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered Agent