

P82000051577

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 MAY -6 PM 5:06

MasterPlan Financial Advisors, Inc.

SUBJECT:

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy,
& Certificate of
Status

ADDITIONAL COPY REQUIRED

Robert D. Lovett

FROM:

Name (Printed or typed)

11555 Heron Bay Boulevard, Suite 200

Address

Coral Springs, FL 33076

City, State & Zip

954-603-0405

Daytime Telephone number

700005462607--5
-05/06/02--01071--009
*****78.75 *****78.75

NOTE: Please provide the original and one copy of the articles.

9-02
5-4
MC

ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

The name of the corporation shall be:

MasterPlan Financial Advisors, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11555 Heron Bay Boulevard, Suite 200
Coral Springs, FL 33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Financial Advisory Services

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Doris Bodnar, 6040 NW 65 Terrace, Parkland, FL 33067
Robert D. Lovett, 4831 NW 103 Drive, Coral Springs, FL 33076

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Robert D. Lovett
11555 Heron Bay Boulevard, Suite 200, Coral Springs, FL 33076

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Doris Bodnar, 6040 NW 65 Terrace, Parkland, FL 33067
Robert D. Lovett, 4831 NW 103 Drive, Coral Springs, FL 33076

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

Date

Signature/Incorporator

Date