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**FLORIDA PROFIT CORPORATION OR P.A.**

**MONTY COCHRAN, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State

October 22, 2002

EMPIRE

SUBJECT: MONTY COCHRAN, INC.  
REF: W02000030327

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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**CERTIFICATE OF INCORPORATION  
OF**

**MONTY COCHRAN, INC.**

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FIRST : The name of the corporation is : **MONTY COCHRAN, INC.**

SECOND : The principal office of the corporation is :

**570 N.W. 66<sup>TH</sup> AVE  
PLANTATION, FL 33317**

THIRD : The nature of the business and objects and purposes proposed to be transacted , promoted and carried on are to do any and all things herein mentioned , as fully and to the same extent as natural persons might of could do , and in any part of the world , viz

" The purpose of the corporation is to engage in any lawful act or activity for which the corporation may be organized under the General Corporation Law of the Florida ."

FOURTH : The corporation shall have the authority to issue one hundred ( 100 ) shares of Common Stock , each share to have No Par Value . The shares may be issued for the consideration expressed in dollars as may be fixed from time to time by the Board of Directors.

FIFTH : The name and address of the sole incorporator of the corporation is as follows :

**MONTY COCHRAN, INC.  
570 N.W. 66<sup>TH</sup> AVE  
PLANTATION FL 33317**

SIXTH : The name and address of the Designated Resident Agent of the Corporation is :

**MONTY COCHRAN  
570 N.W. 66<sup>TH</sup> AVE  
PLANTATION FL 33317**

  
**MONTY COCHRAN, sole incorporator**

Certificate prepared by : **HOWARD R. SCHWARTZ, C.P.A.** 1515 University Drive , Suite 109,  
Coral Springs , Florida 33071

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TOTAL P.04

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**CERTIFICATE DESIGNATING ( OR CHANGING ) PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN THIS STATE , NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED .**

In pursuance of Chapter 607.34 , Florida Statutes , the following is submitted in compliance  
therewith :

FIRST : that **MONTY COCHRAN,** desiring to organize under the laws of the State of  
Florida , with the principal office , as indicated in the Articles of Incorporation , and located in  
Broward County , Florida , at :

**570 N.W 66<sup>TH</sup> AVE  
PLANTATION FL 33317**

has named

**MONTY COCHRAN, INC.  
570 N.W. 66<sup>TH</sup> AVE  
PLANTATION FL 33317**

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as its agent to accept service of process within this state .

**SECOND : ACKNOWLEDGMENT ( Must be signed by designated Agent ) .**

Having been named to accept service of process for the above named corporation , at the place  
designated in this Certificate , I here by accept to act in this capacity , and agree to comply with  
the provisions of said Act relative to keeping open said office .



**MONTY COCHRAN, Resident Agent**

This Certificate Designating Resident Agent prepared by :

**HOWARD R. SCHWARTZ , C.P.A.  
1515 University Drive , Suite 109  
Coral Springs, Florida 33071**

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