

P03000038993

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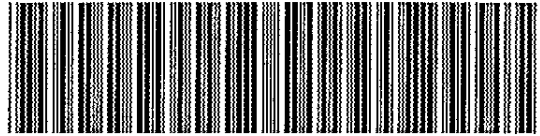
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MICHAEL H. WOLF & ASSOCIATES, LLC

MICHAEL H. WOLF, Attorney-At-Law
LA VERNE MORGAN, Attorney-At-Law
3832 North University Drive • Sunrise, FL 33351
(954) 748-8233 • fax (954) 748-8255

March 20, 2003

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

Re: Harrington & Sons, Inc.

Dear Clerk:

Enclosed please find the following:

1. Original and one copy of the Articles of Incorporation for the above name.
2. Check for \$78.75 made payable to the Dept. of State.
3. Copy of SS-4 form showing that our client has already obtained an EIN.

Please file the original Articles of Incorporation and forward a certified copy of said Articles at your earliest opportunity.

Thank you very much for your cooperation.

Very truly yours,

MICHAEL H. WOLF & ASSOCIATES, LLC


MICHAEL H. WOLF, ESQ.
MHW/lm

enclosures



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 1, 2003

MICHAEL H. WOLF & ASSOCIATES, LLC
% MICHAEL H. WOLF, ESQ.
3832 NORTH UNIVERSITY DR
SUNRISE, FL 33351

SUBJECT: HARRINGTON & SONS, INC.
Ref. Number: W03000009217

We have received your document for HARRINGTON & SONS, INC.. However, the document has not been filed and is being returned for the following:

Enclosed { The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Corporate Specialist
New Filings Section

Letter Number: 203A00019540

RECEIVED
03 APR -4 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
HARRINGTON & SONS, INC.

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: **HARRINGTON & SONS, INC.**

ARTICLE II - PRINCIPAL OFFICE

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

20283 STATE ROAD 7 - SUITE 400, BOCA RATON, FLORIDA 33498

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **100 Shares @ \$1.00 par value**

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**MICHAEL H. WOLF, ESQ.
3832 NORTH UNIVERSITY DRIVE, SUNRISE, FL 33351**

ARTICLE V - INCORPORATORS

The name and street address of the incorporator(s) to these Articles of Incorporation is:

**TIMOTHY F. HARRINGTON
20283 STATE ROAD 7 - SUITE 400, BOCA RATON, FLORIDA 33498**

The undersigned incorporator has executed these Articles of Incorporation on 3/19/03
2003.


TIMOTHY F. HARRINGTON, Incorporator

THIS INSTRUMENT PREPARED BY:
MICHAEL H. WOLF & ASSOCIATES, LLC
3832 NORTH UNIVERSITY DRIVE
SUNRISE, FL 33351
TEL.: (954) 748-8233
FLORIDA BAR #231924

03 APR -7 AM 10:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

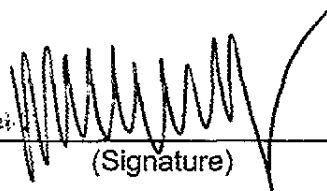
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 of 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS: **HARRINGTON & SONS, INC.**

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

**MICHAEL H. WOLF, ESQ.
MICHAEL H. WOLF & ASSOCIATES, LLC
3832 NORTH UNIVERSITY DRIVE
SUNRISE, FL 33351**

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)

Date: 4-2-03

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA