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## Florida Department of State

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# FLORIDA PROFIT CORPORATION OR P.A.

PANAMENIAN PALMS, INC.

	a sample of the work
Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

#### ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

#### PANAMENIAN PALMS, INC.

ARTICLE II PRINCIPAL OFFICE

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

### PANAMENIAN PALMS, INC.

1621 Collins Avenue, Apt. 420 Miami Beach, FL 33139

#### ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

> Walter Besser MD 1621 Collins Avenue, Apt. 420 Miami Beach, FL 33139

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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#### ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Walter Besser MD - President 1621 Collins Avenue, Apt. 420 Miami Beach, FL 33139

#### ARTICLES VI INCORPORATOR(S)

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

Walter Besser MD 1621 Collins Avenue, Apt. 420 Miami Beach, FL 33139

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Walter Resser MD - Signature

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

2. The name and address of	f the registered agent and office is:	
	Walter Besser MD	SE SE
	Name	ZORO J SECRI ALLA
	1621 Collins Avenue, Apt. 420	
	(P.O. Box or Mail Drop Box NOT Acceptable)	SEE 2
	Miami Beach, FL 33139	_ FS 2 C
	(City / State / Zip)	87 <b>f</b>

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Walter Besser MD (Date)
SIGNATURE