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TRANSMITTAL LETTER

DEPARTMENT OF STATE DIVISION OF CORPORATIONS PO BOX 6327 TALLAHASSEE, FL 32314

SUBJECT:

ICE ARENA OF FLORIDA, INC.

(PROPOSED CORPORATE NAME)

ENCLOSED IS AN ORIGINAL AND ONE COPY OF THE ARTICLES OF INCORPORATION AND A CHECK FOR \$ 78.75.

FROM:

RICHARD L. RIESENBERG

ACCOUNTANT

644 E. HALLANDALE BEACH BOULEVARD

HALLANDALE BEACH, FL 33009

954-458-5514

ARTICLES OF INCORPORATION OF

ICE ARENA OF FLORIDA, INC.

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 #1 NAME OF THE CORPORATION ICE ARENA OF FLORIDA, INC.

ARTICLE #2 PRINCIPAL OFFICE OF THE CORPORATION 12425 TAFT STREET, PEMBROKE PINES, FL 33028

ARTICLE #3 NUMBER OF SHARES 1000 SHARES – COMMON STOCK

ARTICLE #4 INITIAL REGISTERED AGENT FOR THE CORPORATION RICHARD RIESENBERG 644 E. HALLANDALE BEACH BLVD., HALLANDALE, FL 33009

ARTICLE #5 INCORPORATOR(S)

THE NAME(S) AND STREET ADDRESSES OF THE INCORPORATOR(S)
TO THESE ARTICLES OF INCORPORATION ARE:

SHLOMO EPSTEIN, 3267 NE 168TH ST., NORTH MIAMI BEACH, FL 33160 ERNEST CAPARELLI, 2313 SW 57TH TERR., W. HOLLYWOOD, FL 33023

THE UNDERSIGNED INCORPORATOR(S) HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS // DAY

OF OF 200 3:

SIGNATURE

SIGNATIIRE

CERTIFICATE OF DESIGNATION REGISTERED AGENT AND REGISTERED OFFICE

PERSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 617.0501, UNDER THE FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT DESIGNATING THE REGISTERED AGENT AND THE REGISTERED OFFICE OF THE CORPORATION IN THE STATE OF FLORIDA.

- 1. NAME OF CORPORATION: ICE ARENA OF FLORIDA, INC.
- 2. NAME AND ADDRESS OF RESIDENT AGENT:

RICHARD RIESENBERG 644 E. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009

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