

PO400014254

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400025710464

01/14/04--01034--018 **78.75

Handwritten signature/initials

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

04 JAN 14 AM 10:53

RECEIVED

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JAN 20 PM 12:59

Charter Number Only

1/13

Cast management

Requestor's Name

4805 NW 79 Ave #9

Address

Miami, FL 33166

City

State

ZIP

Phone

(305) 593-551 F

VALIDATION ONLY

CORPORATION(S) NAME

EBM GROUP, INC.



Profit
NonProfit

() Amendment

() Merger

() Foreign

() Dissolution

() Mark

() Limited Partnership

() Annual Report

() Other

() Reinstatement

() Reservation

() Change of Registered Agent



Certified Copy

() Photo Copies

() Certificate Under Seal

() Call When Ready

() Call If Problem

() After 4:30

() Walk In

() Will Wait

(X) Pick Up

() Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY

Empire Toll Free: 1-800-432-3028



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

January 16, 2004

EMPIRE CORPORATE KIT

SUBJECT: EBM GROUP, INC.
Ref. Number: W04000002252

RECEIVED
04 JAN 20 AM 11:50
DIVISION OF CORPORATION

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

The document number of the name conflict is N96000000831.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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
Document Specialist
New Filings Section

Letter Number: 704A00003073

ARTICLES OF INCORPORATION

WE THE UNDERSIGNED, HEREBY ASSOCIATE OURSELVES TOGETHER FOR THE PURPOSE OF BECOMING A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA PROVIDING FOR THE FORMATION OF A CORPORATION FOR PROFIT WITH THE POWERS, RIGHTS, PRIVILEGES AND IMMUNITIES HEREINAFTER MENTIONED, AND WE HEREBY MAKE, SUBSCRIBE AND ACKNOWLEDGE AND FILE WITH THE SECRETARY OF FLORIDA THESE ARTICLES OF INCORPORATION; AND TO THAT END WE DO, BY THESE ARTICLES, SET FORTH:

ARTICLE I

THE NAME OF THIS CORPORATION (WHICH IS HEREINAFTER CALLED THE "CORPORATION" IS EBM GROUP OF MIAMI, INC.

ARTICLE II

THIS CORPORATION SHALL EXIST PERPETUALLY, CORPORATION EXISTANCE SHALL BEGAIN ON THE DAY UPON WHICH THESE ARTICLES ARE APPROVED BY THE SECRETARY OF THE STATE OF FLORIDA.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JAN 20 PM 12:59

ARTICLE III

THE PURPOSE OF THIS CORPORATION IS TO TRANSACT ANY OR ALL LAWFUL BUSINESSES FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER CHAPTER 607 OF THE FLORIDA STATUTES.

ARTICLE IV

THIS CORPORATION IS AUTHORIZED TO ISSUE 500 SHARES OF COMMON STOCK, WHICH SAID SHARES SHALL HAVE A PAR VALUE OF TEN (\$10.00) DOLLARS PER SHARE UPON ISSUANCE.

ARTICLE V

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE AT 1128 ROYAL PALM BEACH # 397 ROYAL PALM BEACH, FL 33411 WITH THE PRIVILEGE OF HAVING BRANCH OFFICES WITHIN AND WITHOUT THE STATE OF FLORIDA.

ARTICLE VI

THE INITIAL REGISTERED AGENT OF THIS CORPORATION UPON WHICH PROCESS MAY BE SERVED IS,
LOUIS F. CAST 4805 NW 79 AVENUE #9 MIAMI,FLORIDA 33166

ARTICLE VII

THIS CORPORATION SHALL HAVE ONE DIRECTOR(S) INITIALLY.
THE NUMBER OF DIRECTORS SHALL BE FIXED BY LAW AND MAY BE CHANGED FROM TIME TO TIME.

ARTICLE VIII

THE NAME AND STREET ADDRESSES OF THE INITIAL DIRECTOR OF THIS CORPORATION IS:
BRUCE VERNON 1128 ROYAL PALM BEACH BOULEVARD # 397 ROYAL PALM BEACH,FL
33411. THE AFORSAID DIRECTORS SHALL HOLD OFFICE FOR THE YEAR OF THIS CORPORATION EXISTANCE OR UNTIL A SUCCESSOR IS CHOSEN AS PROVIDED FOR IN THE BYLAWS.

THE INITIAL OFFICERS OF THIS CORPORATION AND THEIR ADDRESSES ARE:

PRESIDENT BRUCE VERNON 1128 ROYAL PALM BEACH BOULEVARD # 397 ROYAL PALM BEACH,FLORIDA 33411

VICE PRESIDENT : BRUCE VERNON 1128 ROYAL PALM BEACH BOULEVARD # 397 ROYAL PALM BEACH, FLORIDA 33411

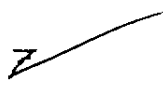
TREASURER : AJA COWELL 1128 ROYAL PALM BEACH BOULEVARD # 397 ROYAL PALM BEACH, FLORIDA 33411

SECRETARY : BRUCE VERNON 1128 ROYAL PALM BEACH BOULEVARD # 397 ROYAL PALM BEACH, FLORIDA 33411

ARTICLE IX

THE NAME AND STREET ADDRESS OF THE INCORPORATOR
BRUCE VERNON 1128 ROYAL PALM BEACH BOULEVARD # 397 ROYAL PALM BEACH ,FLORIDA 33411

THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF INCORPORATION



BRUCE VERNON / PRESIDENT

SIGNATURE / TITLE
BRUCE VERNON / PRESIDENT

CERTIFICATE OF DESIGNATION
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 DESIGNATING THE REGISTERED
OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA

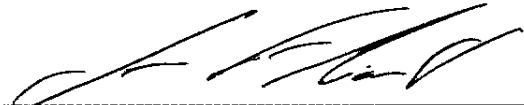
EBM GROUP OF MIAMI, INC.

1. THE NAME OF THE CORPORATION : 1128 ROYAL PALM BEACH
BOULEVARD #397 ROYAL PALM BEACH, FLORIDA 33411
THE NAME AND ADDRESS OF THE REGISTERED AGENT IS :
LOUIS F. CAST 4805 NW 79 AVENUE # 9 MIAMI, FLORIDA 33166

SIGNATURE: 
BRUCE VERNON / PRESIDENT

DATE JANUARY 12, 2004

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.


LOUIS F. CAST

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JAN 20 PM 12:59