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## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : 1200000000257 Phone : (850)224-8870

Fax Number

: (850)224-7047



MICHAEL A. MERMER, P.A.

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# ARTICLES OF INCORPORATION TALLAHASSEE, FLORIDA OF

# MICHAEL A. MERMER, P.A.

The undersigned incorporator, for the purpose of forming a Professional Association under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I: NAME & PURPOSE

The name of the Professional Association is MICHAEL A. MERMER, P.A. The specific nature of business of this Professional Association is the practice of law and legal services.

### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the Professional Association is 12745 N.W. 69<sup>th</sup> Ct. Parkland, FL. 33076.

### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this Professional Association is authorized to have outstanding at any one time is two hundred (200) shares having no par value.

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### ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Michael A. Mermer, Esq., 12745 N.W. 69<sup>th</sup> Ct. Parkland, FL. 33076.

### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

### ARTICLE VI: INITIAL OFFICERS AND DIRECTORS

The name and address of the initial Officer and Director of the Professional Association is Michael A. Mermer, Esq., 12745 N.W. 69th Ct. Parkland, FL. 33076.

The undersigned has executed these Articles of Incorporation this 2<sup>nd</sup> day of June 2004.

"Capital Connection, Inc. by, Weimar Lopez, Client Representative"

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SECKLAMA DE STATE TALLAHASSEE, FLORIDA

### CERTIFICATE OF DESIGNATION

### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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:

Michael A. Merman, P.A.

2. The name and street address of the registered agent and office is: Mixiaula, Menman, Eig.

12745 NW 6944 CT

Parklama F1 33071

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE 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.

Mechael A. Jew