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TRANSMITTAL LETTER

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

SUBJECT: PROTE	ADE FUTURES AND OPTIONS,	INC			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	rinal and one (1) copy of the arti	cles of incorporation and	a check for:		
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: SU	MMER MOTE				
	Name	(Printed or typed)			
	4000 HOLLYWOOD BLVD, SUIT				
	,	Address			
,	HOLLYWOOD, FL 33021	0			
	City,	State & Zip			
	(954) 989 - 9938 Daytime T	elephone number			
raliming resolutions					

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

REVENTED

04 NOV -1 AM 10: 58

October 15, 2004

SUMMER MOTE 4000 HOLLYWOOD BLVD STE 370-N HOLLYWOOD, FL 33021

SUBJECT: PROTRADE FUTURES AND OPTIONS, INC.

Ref. Number: W04000038078

We have received your document for PROTRADE FUTURES AND OPTIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 304A00059527

ARTICLES OF INCORPORATION

TO: SECRETARY OF STATE, STATE OF FLORIDA, TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the Corporation shall be:

PROTRADE FUTURES AND OPTIONS, INC

The principal place of business of this corporation shall be:
4000 Hollywood Blvd. Suite 370-N
Hollywood, FL 33021



ARTICLE II NATURE OF BUSINESS

This corporation may engage in any other business permitted under the laws of the United State, the State of Florida, or any other State, Country, Territory, or Nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1000.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer (s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are): Summer Mote, whom resides at 4000 Hollywood Blvd. Suite 370-N, Hollywood, FL 33021.

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these articles of incorporation is (are): Summer Mote, whom resides at 4000 Hollywood Blvd. Suite 370-N, Hollywood, FL 33021.

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 13 day of October, 2004.

Signature(s) of Incorporator(s)

Summer Mote / President / Incorporator / Register Agent

CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: PROTRADE FUTURES AND OPTIONS, INC
- 2. The name and address of the registered agent and office is:

Summer Mote 4000 Hollywood Blvd. Suite 370-N Hollywood, FL 33021

SIGNATURE:

TITLE: Incorporator / Vice-President / Registered Agent

Date:

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE: Salar Signat