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U.S. DISTRICT COURT
NORTH DAKOTA

JS

2-14

TRANSMITTAL LETTER

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

SUBJECT: ROE-SSAGE, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: NINA GREENE KERSH

Name (Printed or typed)

100 SE SECOND STREET, 36TH FLOOR

Address

MIAMI, FLORIDA 33131

City, State & Zip

(305) 349-2325

Daytime Telephone number

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FEB 7 1977
TALLAHASSEE, FLA

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ROE-SSAGE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

643 N. UNIVERSITY DRIVE
PLANTATION, FL 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

RONITE M. SCHWALB, PRESIDENT, DIRECTOR
643 N. UNIVERSITY DRIVE
PLANTATION, FL 33324

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

NINA GREENE KERSH, ESQ.
GENOVESE JOBLOVE & BATTISTA, PA
100 SE 2ND STREET, SUITE 3600
MIAMI, FL 33131

ARTICLE VII INCORPORATOR

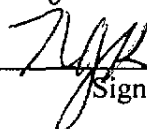
The name and address of the Incorporator is:

NINA GREENE KERSH, ESQ.
GENOVESE JOBLOVE & BATTISTA, PA
100 SE 2ND STREET, SUITE 3600
MIAMI, FL 33131

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator


Date


Date

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CLERK OF DISTRICT COURT
STATE OF FLORIDA
MIAMI COUNTY