

P05000039962

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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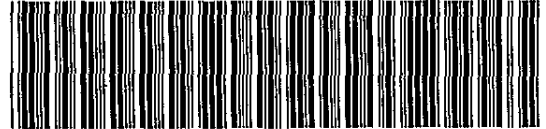
(Business Entity Name)

(Document Number)

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05 MAR -7 PM12:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

CB 3-112

TRANSMITTAL LETTER

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

SUBJECT: DAVID E. MALINOFF, 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: DAVID E. MALINOFF

Name (Printed or typed)

11265 ROUNDELAY ROAD

Address

COOPER CITY, FLORIDA 33028

City, State & Zip

Daytime Telephone number

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:

DAVID E. MALINOFF, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11265 ROUNDELAY ROAD, COOPER CITY, FLORIDA 33026

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE SALES/LEASING

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):

DAVID E. MALINOFF, PRES; SECY; TREAS.

ARTICLE VI REGISTERED AGENT

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

DAVID E. MALINOFF
11265 ROUNDELAY ROAD
COOPER CITY, FLORIDA 33026

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID E. MALINOFF
11265 ROUNDELAY ROAD
COOPER CITY, FLORIDA 33026

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

2/24/05

Date



Signature/Incorporator

2/24/05

Date

APPROVED
AND
FILED

05 MAR -7 PM 12: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA