# P05000114342

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SECRETARY OF STATE DIVISION OF COMPORATION

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## CORPORATE ACCESS,

### "When you need ACCESS to the world"

	INC. 236 East 6th Avenue . Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666	•
	WALK IN PICK UP: 8/16/05 Hinds	
	CERTIFIED COPY	\
	☐ PHOTOCOPY	*
	CUS	
	FILING Articles	
1.	FBOLYA PALF, Inc. (CORPORATE NAME AND DOCUMENT #)	-
2.	(CORPORATE NAME AND DOCUMENT #)	
3.	(CORPORATE NAME AND DOCUMENT #)	
4.	(CORPORATE NAME AND DOCUMENT #)	<u>.</u> .
5.	(CORPORATE NAME AND DOCUMENT #)	
6.	(CORPORATE NAME AND DOCUMENT #)	- ·
SPF	ECIAL INSTRUCTIONS:	
		<b>,-</b>

### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the FloridiECRETARY OF STATE Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

05 AUG 16 PM 2: 52

The name of the corporation shall be:

IBOLYA PALFI INC

ARTICLE II

The principal place of business address of this corporation shall be:

3108 SW 24 STREET HALLANDALE FL 33009

The mailing address of this corporation shall be: 3108 SW 24 STREET HALLANDALE FL 33009

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 Shares

ARTICLE IV

The name and Florida street address of the initial registered agent is:

PALFI, IBOLYA 3108 SW 24 STREET HALLANDALE FL 33009

ARTICLE V.

Names and addresses of incorporators are of articles of Incorporation is:

PALFI, IBOLYA 3108 SW 24 STREET HALLANDALE FL 33009

Signature/Incorporator

Date

#### ARTICLE VI.

Names and addresses of officers of the corporation are:

President: Palfi, Ibolya 3108 SW 24 Street Hallandale FL 33009

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 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

/4047 /W. Signature / Registered Agent

08-11-05 Pate SECRETARY OF STATES
DIVISION OF AUG 16 PM 2: 52