

# FLORIDA PROFIT/NON PROFIT CORPORATION

## 1st capital trust corp.

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### ARTICLES OF INCORPORATIONS

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

## ARTICLE I NAME

The name of the corporation shall be:

#### **1ST CAPITAL TRUST CORP**

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shales:

9050 Pines Blvd, Ste 383 Pembroke Pines, FL 33024

### **ARTICLE III SHARES**

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

One thousand (1,000) shares of common stock having a par value of one dollar (\$1) each.

#### **ARTICLE IV INITIAL OFFICERS AND/OR DIRECTORS**

Straider Bellier-President 9050 Pines Blvd, Ste 383 Pembroke Pines, FL 33024

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## ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Straider Bellier 9050 Pines Blvd, Ste 383 Pumbroke Pines, FL 33024

## ARTICLE VI INCORPORATOR (S)

The name(s) and street address (es) of the incorporator(s) to these Articles of Incorporation is (are):

Streider Bellier 9050 Pines Blvd, Ste 383 Pumbroke Fines, FL 33024

The Undersigned incorporator(s) has (have) executed these Articles of incorporation this

band Signature

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## CERTIFICATE OF DESIGNATED OF

## **REGISTERED AGENT / REGISTERED OFFICE**

PURSUANT TO THE PROVISION OF SECTION 607.0501 OR 617.0501, 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 is:

#### **1ST CAPITAL TRUST CORP**

2. The name and address of the registered agent and office is:

Straider Bellier 9050 Pines Blvd, Ste 383 Pembroke Pines, FL 33024 FILED

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 have by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision 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.

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Signature	· · · · /	Date	/ /	

Division of Corporations. P.O. Box 6327, Tallahassee, Fl 32314

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