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PICK-UP WAIT MAIL				
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(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Constitution of The Office				
Special Instructions to Filing Officer:				
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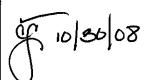




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SECRETARY OF STATE DIVISION OF CORPORATION



COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 OCT 29 AM II: 58

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

SUBJECT: April A.	Horowitz Incorporated			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	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: April A. Horowitz				
	Name	(Printed or typed)		
	288 N.W. 119th Way	Address		
	Coral Springs, Florida 33071 City,	State & Zip		
	954 346-8400	elenhane 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)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

08:0CT 29 AM11:58

April A. Horowitz Incorporated

PRINCIPAL OFFICE <u>ARTICLE II</u>

The principal street address and mailing address, if different is: 288 N.W. 119th Way

Coral Springs, Florida 33071

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Customer Service Representative

ARTICLE IV SHARES

The number of shares of stock is: One Thousand shares par value of One Dollar (\$1.00) per share

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): April A. Horowitz (President) (Treasurer) 288 N.W. 119th Way Coral Springs, Florida 33071

ARTICLE VI REGISTERED AGENT

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

April A. Horowitz 288 N.W. 119th Way Coral Springs, Florida 33071

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: April A. Horowitz 288 N.W. 119th Way Coral Springs, Fl. 33071

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

gpature/Registered Agent

October 24, 2208

Date

October 24, 2008

Date

Signature/Incorporator