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FLORIDA RESEARCH AND

85094

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Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850) 617-6381

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TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Warranty Sales, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

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COVER LETTER

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

SUBJECT: WARRANTY SALES, 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: MYRON FINKELSTEIN**

Name (Printed or typed)

2625 N. UNIVERSITY DRIVE, SUITE 300

Address

CORAL SPRINGS, FLORIDA 33065

City, State & Zip

1-800-896-7001

Daytime Telephone number

mike@elfinancs.com

E-mail address: (to be used for future annual report notification)

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

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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:

WARRANTY SALES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2825 N. UNIVERSITY DRIVE, SUITE 300

CORAL SPRINGS, FLORIDA 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

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):

MYRON	2825 N.	CORAL	President/
FINKELSTEIN	UNIVERSITY	SPRINGS	Director
	DRIVE, SUITE 300	FLORIDA 33065	

ARTICLE VI REGISTERED AGENT

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

MYRON FINKELSTEIN

2825 N. UNIVERSITY DRIVE, SUITE 300

CORAL SPRINGS, FLORIDA 33065

ARTICLE VII INCORPORATOR

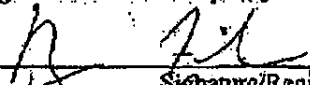
The name and address of the Incorporator is:

MYRON FINKELSTEIN

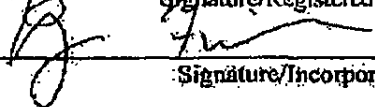
2825 N. UNIVERSITY DRIVE, SUITE 300

CORAL SPRINGS, FLORIDA 33065

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

03-29-10

Date

03-29-10

Date

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 TALLAHASSEE, FLORIDA

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