

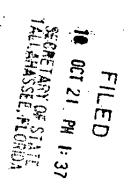
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COVER LETTER

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

SUBJECT: New York Schlock Exc	hange, Inc.	
(PROPOSED CORPORA	TE NAME – MUST INC	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	nd a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
FROM: Todd S. Payne, Esquire	(Printed or typed)	
Zebersky & Payne, LLP.	110 SE 6th St.,	Ste. 2150
Ft. Lauderdale, FL 3330	1 State & Zip	
(954) 989-6333 Daytime To	elephone number	· · · · · · · · · · · · · · · · · · ·
tpayne@zpllp.com E-mail address: (to be used	for future annual report	notification)

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	<u>NAME</u>		
The name of the co	orporation shall be: New York Schlock E	Exchange, Inc.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing a	ddress, if different is:
;	3560 S. Ocean Blvd.		
	\$ 504		
\$	South Palm Beach, FL 33480		
ARTICLE III	PURPOSE		
	which the corporation is organized is:		
	lawful business		7 40 3
ARTICLE IV			
The number of sha	ares of stock is: 1,000		
ADTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ODE	응로 🙃
	itle:Sid Silverman, President		္ာြ≅ ယ
Address:	3560 S. Ocean Blvd.		
	#504		
	South Palm Beach, FL 33480		
Nama and T	"itle:	Nama and Title	
Address:	ille		
N 177	v.,	No. 1 mil	
Name and 1 Address:	itle:	Name and Title:	
Address.		Address.	
	REGISTERED AGENT	\ . Cd : 4	
Name:	orida street address (P.O. Box NOT acceptable) Todd S. Payne, Esquire		
Address:	110 S.E. 6th Street, Suite 2150		
	Et Lauderdale, FL 33301		
	,		
ARTICLE VII			
Name:	dress of the Incorporator is:		
Address:	Todd S. Payne, Esquire 110 S.E. 6th Street, Suite 2150	·-···-	
	Ft. Lauderdale, FL 33301		
			d
	ed as registered agent to accept service of proc m familiar with and accept The appointment as i		
inis cerujicaie, i ui	m jamutar wan ana accept the appointment as t	regisiereu ageni ana agree io a	сі ін ініз сирисну
			10/19/2010
Talks. Phi	yne Required Signature/Registered Agent		Date
I WOOD, PAI	Trequire Signature/Registered Agent		Date
	ument and affirm that the facts stated herein a		
document to the D	epartment of State constitutes a third degree fel	ony as provided for in s.817.15	55, F.S.
	- ball		1011010515
	TO BUY		10/19/2010
TMNS On.	Required Signature/Incorporator		Date