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# FLORIDA PROFIT/NON PROFIT CORPORATION LAW OFFICES OF ALLISON B. LANE, P.A.

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## ARTICLES OF INCORPORATION OF

13 MAR - 1 PM 12: 49

LAW OFFICES OF ALLISON B. LANE, P.A.

The undersigned hereby makes and subscribes to these Articles of Incorporation intending to form a Corporation under the provisions of the Florida Statutes.

## ARTICLE I: NAME

The name of this Corporation is: LAW OFFICES OF ALLISON B. LANE, P.A.

## **ARTICLE II: PRINCIPAL OFFICE**

The initial street address and the initial principal office of the Corporation shall be 1386 Cypress Way, Boca Raton, FL 33486.

## **ARTICLE III: PURPOSE**

The purpose of the Corporation is the practice of law.

#### **ARTICLE IV: SHARES**

The aggregate number of shares which the Corporation shall have the authority to issue shall be 100 at no par common stock.

## ARTICLE V: INITIAL DIRECTOR AND OFFICERS

The number of Directors constituting the initial Board of Directors of this Corporation is One (1). The name and street address of the sole initial Director, President, Secretary and Treasurer of this Corporation shall be:

Name
ALLISON B. LANE

Address 1386 Cypress Way Boca Raton, FL 33486

#### ARTICLE VI: REGISTERED AGENT

The name of the Corporation's initial registered agent is Allison B. Lane, 1386 Cypress Way, Boca Raton, FL 33486.

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## ARTICLE VII: INCORPORATOR

The name and address of the Incorporator is: Allison B. Lane, 1386 Cypress Way, Boca Raton, FL 33486.

## ARTICLE VIII: INDEMNIFICATION

It is the intention of the Corporation to indemnify its officers, directors, employees and agents to the extent permitted under Florida law.

#### ARTICLE IX: CORPORATE BUSINESS AND AFFAIRS

Anything to the contrary contained in these Articles of Incorporation notwithstanding, if the Shareholders of the Corporation shall so elect, they may exercise all powers and conduct the business and affairs of this Corporation in lieu of the Board of Directors.

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.

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Fax Audit Number: 413 000 4888 73