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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JAN 22 AM 10:59

## COVER LETTER

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

SUBJECT: **BIMINI TOWERS, 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: **Alan J. Paoli, Esquire**

Name (Printed or typed)

**1720 Harrison Street, Suite 6CW**

Address

**Hollywood, FL 33020**

City, State & Zip

**954-925-9828**

Daytime Telephone number

**alan@paolilawfl.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 NAME**

The name of the corporation shall be: BIMINI TOWERS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

4803 Sunset Court, #206A

Cape Coral, FL 33904

Mailing address, if different is:

16751 Royal Poinciana Drive

Weston, FL 33326

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business purpose.

**ARTICLE IV SHARES**

The number of shares of stock is: Fifty (50)

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**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Edward Wallach, President

Address: 16751 Royal Poinciana Drive  
Weston, FL 33326

Name and Title: Carol Wallach, Director

Address: 355 Fairway Circle  
Fort Lauderdale, FL 33326

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Alan J. Paoli, Esquire  
Address: 1720 Harrison Street, Suite 6CW  
Hollywood, FL 33020

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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Edward Wallach  
Address: 16751 Royal Poinciana Drive  
Weston, FL 33326

*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*

\_\_\_\_\_  
Required Signature/Registered Agent

January 20, 2014  
Date

*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.*

Edward H. Wallach  
Required Signature/Incorporator

January 20, 2014  
Date

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Fort Lauderdale, FL 33326

Name and Title: \_\_\_\_\_

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Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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14 JAN 22 AM 11:00

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\_\_\_\_\_  
Required Signature/Registered Agent

January 20, 2014  
Date

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Edward H Wallach  
Required Signature/Incorporator

January 20, 2014  
Date