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Email Address: PRUBENSTEIN01@GMAIL.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION  
WORKFORCE LOGIX INC**

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## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

**WORKFORCE LOGIX INC**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**19501 WEST COUNTRY CLUB DRIVE - PH12  
AVENTURA, FL 33180**

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**200 Shares at no par value**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**PETER RUBENSTEIN  
19501 WEST COUNTRY CLUB DRIVE - PH 12  
AVENTURA, FLORIDA 33180**

*Prepared By:*  
**Bruce B. Hubbard**  
77 East John St.  
Hicksville, New York 11801  
1-516-935-3940

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**ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)**

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

PETER RUBENSTEIN -PRESIDENT/DIRECTOR  
19501 WEST COUNTRY CLUB DRIVE - PH 12  
AVENTURA, FLORIDA 33180

**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

PETER RUBENSTEIN  
19501 WEST COUNTRY CLUB DRIVE - PH 12  
AVENTURA, FLORIDA 33180

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

4RD day of JANUARY 20 17

  
\_\_\_\_\_  
PETER RUBENSTEIN  
Signature

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNA TING THE  
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **WORKFORCE LOGIX INC**

2. The name and address of the registered agent and office is:

**PETER RUBENSTEIN**

Name

**19501 WEST COUNTRY CLUB DRIVE - PH 12**

(P.O. Box or Mail Drop Box NOT Acceptable)

**AVENTURA, FLORIDA 33180**

(City / State / Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

17 JAN -4 AM 11:30  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

  
PETER RUBENSTEIN  
SIGNATURE

**1/4/2017**

(Date)

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