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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION

Howard I. Rosen Inc.

Certificate of Status	0
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Page Count	01
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICES

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AND
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MAY 11 2016

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

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: Howard J. Rosen Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

115 WINDSOR POINT DRIVE

115 WINDSOR POINT DRIVE

PALM BEACH GARDENS, FL 33418

PALM BEACH GARDENS, FL 33418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

To conduct all activities set forth and permitted under and Florida corporation law

ARTICLE IV SHARES

The number of shares of stock is: 100 NPV

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Howard Rosen, DIRECTOR

Name and Title: _____

Address 115 WINDSOR POINT DRIVE

Address: _____

PALM BEACH GARDENS, FL 33418

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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: Howard Rosen
Address: 115 WINDSOR POINT DRIVE
PALM BEACH GARDENS, FL 33418

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Howard Rosen
Address: 115 WINDSOR POINT DRIVE
PALM BEACH GARDENS, FL 33418

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X  _____
Required Signature/Registered Agent

6-9-17
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.

X  _____
Required Signature/Incorporator

6-9-17
Date