TRANSMITTAL LETTER

P95000027888

95 APR 5 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

[redacted]

400001448254
-04/05/95--01095--010
*****78.75 *****78.75

SUBJECT: PCF PARTNER'S, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ $70.00 Filing Fee

☒ $78.75 Filing Fee & Certificate

☐ $122.50 Filing Fee & Certified Copy

☐ $131.25 Filing Fee, Certified Copy & Certificate

Additional Copy Required

FROM: DAVID Q. HILL
Name (printed or typed)

1304 SW 160 AVE.
SUITE 225
Address

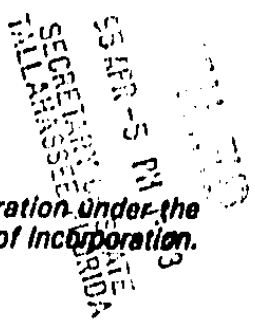
FT. LAUDERDALE, FL 33326
City, State & Zip

305 389 7082
Daytime Telephone number

4-7-95

NOTE: Please provide the original and one copy of the articles.

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:

PCF PARTNER'S, INC.

ARTICLE II PRINCIPAL OFFICE

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

1304 SW 160 AVE
SUITE 225
FT. LAUDERDALE, FL 333.26

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAVID Q. HILL
1304 SW 160 AVE
SUITE 225
FT. LAUDERDALE, FL
33326

ARTICLE V INCORPORATOR(S)

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

DAVID Q. HILL
1143 WATERVIEW LN
FT. LAUDERDALE, FL 33326

RICHARD ROGERS
13240 STIRLING RD
FT. LAUDERDALE, FL 33330

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

28 day of MARCH, 1995.

David Q. Hill
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - $35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

95 MAR -5 PM 1:53

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: PCF PARTNER'S, INC

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

DAVID Q. HILL
(Name)
1304 SW 160 AVE
SUITE 225
(P.O. Box or Mail Drop Box NOT acceptable)
FT. LAUDERDALE, FL 33326
(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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

David Q. Hill
(Signature)

03/2?/95
(Date)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 DEC 30 AM 9:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P95000027888

1. Corporation Name

PCF PARTNER'S, INC.

Principal Place of Business	Mailing Address
~~4004 SW 160TH AVENUE STE 225~~ ~~FORT LAUDERDALE FL 33331~~	1304 SW 160TH AVENUE STE 225 FORT LAUDERDALE FL 33326

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 9600

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.: 7767 PINES BLVD	Suite, Apt. #, etc.:
City & State: PEMBROKE PINES, FL	City & State:
Zip: 33024 Country: US	Zip: Country:

4. Date Incorporated or Qualified To Do Business In Florida: 04/05/1995

5. FEI Number: 65-0577334 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	PRES. DAVID Q. HILL	1143 WATERVIEW LN ~~FT. LAUD. FL.~~	FT. LAUD. FL 33326
V	V. P. RICHARD B. ROGERS	17240 STIRLING RD	DAVIE, FL 33330

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-01/03/97--01179--020
*****375.00 *****375.00

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
HILL, DAVID Q 1304 SW 160TH AVENUE STE 225 FORT LAUDERDALE FL 33326	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (7/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: David Q. Hill — Date: 9/30/96
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: David Q. Hill DAVID Q. HILL 9/30/96 954 983 7776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #