

# P95000038001

## CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite J, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 95 MAY 12 PM 3:28

REQUEST TAKEN CONFIRMED APPROVED  
 DATE \_\_\_\_\_  
 TIME \_\_\_\_\_ CK No. \_\_\_\_\_  
 BY AAK \_\_\_\_\_

WALK-IN  
 Will Pick Up 512 200

RE: Alan B Seif, Attorney  
P.A.

	C.O. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™	_____	_____
<input checked="" type="checkbox"/> Art. of Inc. File	_____	_____
<input type="checkbox"/> Corp. Record Search	_____	_____
<input type="checkbox"/> Ltd. Partnership File	_____	_____
<input type="checkbox"/> Foreign Corp. File	_____	_____
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)	_____	_____
<input type="checkbox"/> Art. of Amend. File	_____	_____
<input type="checkbox"/> Dissolution/Withdrawal	_____	_____
<input type="checkbox"/> C U B-	_____	_____
<input type="checkbox"/> Fictitious Name File	_____	_____
<input type="checkbox"/> Name Reservation	_____	_____
<input type="checkbox"/> Annual Report/Reinstatement	_____	_____
<input type="checkbox"/> Reg. Agent Service	_____	_____
<input type="checkbox"/> Document Filing	_____	_____
<input type="checkbox"/> Corporate Kit	_____	_____
<input type="checkbox"/> Vehicle Search	_____	_____
<input type="checkbox"/> Driving Record	_____	_____
<input type="checkbox"/> Document Retrieval	_____	_____
<input type="checkbox"/> UCC 1 or 3 File	_____	_____
<input type="checkbox"/> UCC 11 Search	_____	_____
<input type="checkbox"/> UCC 11 Retrieval	_____	_____
<input type="checkbox"/> File No.'s, Copies	_____	_____
<input type="checkbox"/> Courier Service	_____	_____
<input type="checkbox"/> Shipping/Handling	_____	_____
<input type="checkbox"/> Phone ( )	_____	_____
<input type="checkbox"/> Top Priority	_____	_____
<input type="checkbox"/> Express Mail Prep.	_____	_____
<input type="checkbox"/> FAX ( ) pgs.	_____	_____
<b>SUBTOTALS</b>	_____	_____

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____
	\$ _____

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAY 12 PM 3:28

ARTICLES OF INCORPORATION  
OF  
ALAN B. SEIF, ATTORNEY, P.A.

ARTICLE I. NAME

The name of this corporation shall be ALAN B. SEIF, ATTORNEY, P.A.

ARTICLE II. COMMENCEMENT & DURATION

The commencement of the corporations existence shall be at the time of filing of these Articles of Incorporation by the Secretary of State. The Corporation shall enjoy a perpetual existence unless earlier dissolved.

ARTICLE III. PURPOSE

The corporation is being organized for the purpose of engaging in the business practice of law, and any and all other business transactions permitted under the laws of the State of Florida, and the United States.

ARTICLE IV. PRINCIPAL OFFICE, INITIAL REGISTERED OFFICE & AGENT

The corporation's principal office shall be:

1110 N.E. 163RD STREET, SUITE 4  
NORTH MIAMI BEACH, FL 33162

The name and address of the corporation's initial registered agent is:

ALAN B. SEIF  
1110 N.E. 163RD STREET, SUITE 4  
NORTH MIAMI BEACH, FL 33162

ARTICLE V. CAPITAL STOCK

The corporation is authorized to issue 500 shares of no par value common stock.

ARTICLE VI. INITIAL BOARD OF DIRECTORS

The Corporation shall initially have one Director. The number of Directors may be increased or decreased from time to time in accordance with the By-laws of the Corporation, but shall never be less than one. The name and address of the initial director is:

ALAN B. SEIF  
1110 N.E. 163RD STREET SUITE 4  
NORTH MIAMI BEACH, FL 33162

ARTICLE VII. INDEMNIFICATION

The Corporation shall indemnify any Director or Officer, current or former, to the fullest extent of the law.


ARTICLE IIX. INCORPORATOR

The name and address of the Incorporator filing these Articles of Incorporation is:

Alan Barton Seif  
Attorney at Law  
1110 N.E. 163rd Street, Suite 4  
North Miami Beach, FL 33162

ARTICLE IX. AMENDMENT

This corporation reserves the right to amend or repeal any provision in these Articles of Incorporation, or any amendments hereto. Any rights conferred upon the shareholders shall be subject to this reservation.

  
\_\_\_\_\_  
Alan Barton Seif, Esq., Incorporator

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAY 12 PM 3:28 "

DESIGNATION OF AND ACCEPTANCE BY REGISTERED AGENT

I, ALAN B. SEIF, hereby accept the designation as registered agent and agree to serve as such for ALAN B. SEIF, ATTORNEY, P.A.

Alan B. Seif  
ALAN B. SEIF, Registered Agent

ALAN B. SEIF, designated above to be the initial registered agent who is personally known to me, or whom produced a Florida drivers license as identification, personally appeared before me at the time of notarization, and, under oath, acknowledged signing these Articles of Incorporation of ALAN B. SEIF, ATTORNEY, P.A.

[Signature]  
Notary Public

REBECCA GRACE BEKHORE  
Printed or Typed Name

