

P96000038668

**CAPITAL CONNECTION, INC.**

417 E. Virginia St., Suite 1, 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 \$ \_\_\_\_\_

RE: Law Office of Ruben  
N. G. Miller, P.A.  
 TALLAHASSEE, FL 32302  
 C.C. FEE: DISBURSED

- Capital Express™
- Art. of Inc. File
- Corp. Record Search
- Ltd. Partnership File
- Foreign Corp. File
- ( ) Cert. Copy(s)
- Art. of Amend. File
- Dissolution/Withdrawal
- C U S -
- Fictitious Name File
- Name Reservation
- Annual Report/Restatement
- Reg. Agent Service
- Document Filing
- Corporate Kit
- Vehicle Search
- Driving Record
- Document Retrieval
- UCC 1 or 3 File
- UCC 11 Search
- UCC 11 Retrieval
- File No.'s, Copies
- Courier Service
- Shipping/Handling
- Phone ( )
- Top Priority
- Express Mail Prop.
- FAX ( ) pgs.

500001803025  
 -05/06/96-01043-007  
 \*\*\*122.50 \*\*\*122.50

<b>SUBTOTALS</b>	
FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$ 22
PREPAID.....	\$
BALANCE DUE.....	\$
	\$

*PH 5/16/96*

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	_____	_____	_____
TIME	<u>AC</u>	_____	CK No. _____
BY	_____	_____	_____

WALK-IN 5/16 11:00  
 Will Pick Up \_\_\_\_\_

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!

**ARTICLES OF INCORPORATION**  
**OF**  
**LAW OFFICE OF RUBEN N. GOTLIEB, P.A.**

MAY 11 1956  
96 MAY -6 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, acting as Incorporator of a professional services corporation under the laws of the State of Florida, adopts the following Articles of Incorporation for such Corporation:

**1. NAME.**

The name of this corporation is

**LAW OFFICE OF RUBEN N. GOTLIEB, P.A.**

**2. DURATION.**

The period of duration shall be perpetual.

**3. PURPOSE.**

The purpose of this corporation is to engage in the practice of law and to exercise the powers now or hereafter granted to professional service corporations.

**4. CAPITAL STOCK.**

The corporation is authorized to issue one hundred (100) shares, of common stock, all of one class, at no par value.

**5. PRINCIPAL OFFICE AND REGISTERED AGENT.**

The name and address of the initial registered agent and the principal office of this corporation, which are one and the same is as follows:

Ruben N. Gotlieb  
3880 N. 45th Ave.  
Hollywood, Florida 33021

**6. INITIAL BOARD OF DIRECTORS.**

This corporation shall have one (1) director initially. The number of directors may be increased from time to time by an amendment to the bylaws of the corporation in the manner provided by law, but shall never be less than one (1). The name and address of the initial director of this corporation, who shall hold office until the first annual meeting of shareholders, are:

Ruben N. Gotlieb  
3880 N. 45th Ave.  
Hollywood, Florida 33021

**7. INCORPORATOR.**

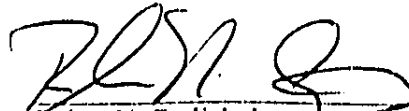
The name and address of the initial Incorporator signing these Articles of

Incorporation is:

Ruben N. Gotlieb  
3880 N. 45th Ave.  
Hollywood, Florida 33021

FILED  
96 MAY -6 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 18th day of March 1996.

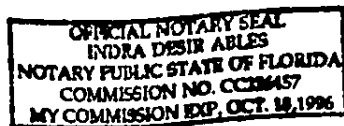
  
Ruben N. Gotlieb, Incorporator

I hereby am familiar with and accept the duties and responsibilities as Registered Agent for this Corporation.

  
Ruben N. Gotlieb, Registered Agent

STATE OF FLORIDA )  
COUNTY OF DADE )

The foregoing instrument was acknowledged before me this 18th day of March, 1996 by **RUBEN N. GOTLIEB**, who is personally known to me and who did take an oath.





Notary Public State of Florida  
At Large  
Commission No.  
My Commission Expires: