

P960000063490

TRANSMITTAL LETTER

FILED

96 JUL 26 AM 10:54

SECRET  
TALLAHASSEE, FLORIDA

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

800001905878

-07/26/96--01076--009

\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Bene Fits Plan Design, 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:

JOHN D. KERR  
Name (printed or typed)

5611 BRANCH ST.  
Address

HOollywood, FL 33021  
City, State & Zip

(954) 962-1649  
Daytime Telephone number

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

73096

ORIGINAL.

## 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.

FILED  
96 JUL 26 11 10:54  
SECRET  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

*BENEFITS PLAN Design, Inc.*

### ARTICLE II PRINCIPAL OFFICE

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

*5611 BRANCH ST.  
HOLLYWOOD, FL 33021*

### ARTICLE III SHARES

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

*100*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*JOHN D. KERR  
5611 BRANCH ST.  
HOLLYWOOD, FL 33021*

*John D. Kerr*

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

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

*JOHN D. KERN*  
*5611 BRANCH ST.*  
*HOLLYWOOD, FL 33021*

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

23 day of July, 19 96.

(An additional article must be added if an effective date is requested.)

*John D. Kern*  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

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

96 JUL 26 11 10 AM  
FILED  
TALLAHASSEE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:

Benefits Plan Design, Inc.

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

JOHN D. KERR  
(NAME)

5611 BRANCH ST.  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

HOLLYWOOD, FL 33021  
(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.*

John D. Kerr  
(SIGNATURE)

7/23/96.  
(DATE)