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TO: DIVISION OF CORPORATIONS FROM: FAS-T CORP. AGENTS, INC.  
DEPARTMENT OF STATE 8405 NW 53RD ST  
STATE OF FLORIDA SUITE C-100  
409 EAST GAINES STREET MIAMI FL 33166-  
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ  
FAX: (904) 922-4000 PHONE: (305) 599-0839

FAX: (305) 592-9591

((H96000010733)) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: STEPHEN J. PETOSA, P.A.

FAX AUDIT NUMBER: H96000010733 CURRENT STATUS: REQUESTED

DATE REQUESTED: 08/02/1996 TIME REQUESTED: 10:20:45

CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 1

NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$78.75 ACCOUNT NUMBER: 071001002335

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\*\* ENTER 'M' FOR MENU. \*\*

8/02/96

FLORIDA DIVISION OF CORPORATIONS

10:21 AM

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ELECTRONIC PROCESSING MENU

FILED  
96 AUG -5 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Spec. NAB*

*8/5*

96 AUG -2 PM 1:16

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August 5, 1996

FAS-T CORP. AGENTS, INC.

MIAMI, FL

SUBJECT: STEPHEN J. PETOSA, P.A.  
REF: W96000016209

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

The specific nature of business of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6937.

Jerri Weinmann  
Staff Assistant

FAX Aud. #: H96000010733  
Letter Number: 196A00037120

**ARTICLES OF INCORPORATION****OF**

STEPHEN J. PETOSA, P.A.

FILED  
96 AUG -5 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be: STEPHEN J. PETOSA, P.A.

The principal place of business of this corporation shall be: 611 E. Woolbright Rd. #201-A  
Boynton Beach, Fl 33435

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation. Real Estate

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 Shares at \$1.00 Par Value.

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Stephen J. Petosa     611 E. Woolbright Rd. #201-A  
Boynton Beach, Fl 33435

Prepared by: Stephen J. Petosa  
611 E. Woolbright Rd. #201-A  
Boynton Beach, Fl 33435  
(407) 738-2604


**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Stephen J. Petosa 611 E. Woolbright Rd. #201-A  
Boynton Beach, Fl 33435

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these  
Articles of Incorporation this 29 day of July, 1976

Signature(s) of Incorporator(s)

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Pursuant to the provisions of Section 607.325, 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: STEPHEN J. PETOSA, P.A.

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

Stephen J. Petosa, 611 E. Woolbright Rd., #201  
(P.O. BOX NOT ACCEPTABLE)

Boynton Beach, FL 33435  
(CITY/STATE/ZIP)

SIGNATURE

TITLE

DATE

*[Signature]*  
(corporate officer)  
*President*  
4/29/96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE

*[Signature]*  
4/29/96

REGISTERED AGENT FILING FEE:

FILED

96 AUG -5 AM 11:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA