

NEIMARK. GREENE & NADEL

PROFESSIONAL ASSOCIATION

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BUITE 1102 1100 CONPURATE DRIVE FORT LAUDICRDALIE, FLORIDA 115334

TALLAHAL OF A LURIDA

TELEPHONE (984) 493-8000 TELEPAX (984) 493-8808

August 23, 1996

Secretary of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

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Re:

Warranty Safeguard Systems, Inc.

Our File No.: 859-1063-1CC

Dear Sir or Madam:

Enclosed is an original and one copy of the Articles of Incorporation for the above-referenced corporation. Also enclosed is our check in the amount of \$70.00 to cover the charges for filing fees and registered agent.

Please return a true copy of the Articles of Incorporation showing that they have been received and filed. We have enclosed a self-addressed, stamped envelope for your convenience in returning same.

Thank you for your cooperation.

Very truly yours,

NEIMARK, GREENE & NADEL, P.A.

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CORTA, NEIMARK

CAN:dp Enclosures

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ARTICLES OF INCORPORATION

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OF

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WARRANTY SAFEGUARD SYSTEMS, INC.

I, the undersigned, a natural person competent to contract, do hereby make, subscribe and file these Articles of Incorporation for the purpose of organizing a corporation under the laws of the State of Florida.

ARTICLE | NAME OF CORPORATION

The name of this Corporation shall be:

WARRANTY SAFEGUARD SYSTEMS, INC.

ARTICLE II GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE III CAPITAL STOCK

The total authorized capital stock of this Corporation is 300 shares of Common Stock, par value \$.01 per share.

ARTICLEIV TERMOFEXISTENCE

The Corporation shall exist perpetually.

ARTICLE V ADDRESS OF PRINCIPAL OFFICE IN THIS STATE

The initial street address of the principal office of this Corporation in the State of Floridais 9228 NW2nd Street, Coral Springs, 33071. The Board of Directors may from time to time move the principal office to another address in Florida.

ARTICLE VI NUMBER OF DIRECTORS

This Corporation shall have not less than one (1) Director.

ARTICLE VII INCORPORATOR

The name and street address of the Incorporator of these articles is:

CORTA. NEIMARK, ESQ. 800 Corporate Drive, Suite 602 Fort Lauderdale, FL 33334

ARTICLE VIII INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is 800 Corporate Drive, Suite 602, Fort Lauderdale, FL 33334, and the name of the initial registered agent of the Corporation at that address is Cort A. Neimark.

ARTICLE IX COMMENCEMENT OF CORPORATE EXISTENCE

Pursuant to S commence its corporate ex	Section 607.0203, Florida Statutes, this Corporation shall xistence upon filing.
STATE OF FLORIDA COUNTY OF BROWARD	CORTA. NEIMARK, INCORPORATOR
authorized in the State and appeared CortA. Neimark, to who executed the foregoin	RTIFY that on this day, before me, a Notary Public duly County named above to take acknowledgements, personally me known to be the person described as incorporator in and g Articles of Incorporation and who swore and acknowledgeding Articles of Incorporation for the purposes therein set forth.
WITNESS my hand and official seal.	Notary Public
	Print, stamp or type as commissioned ☐ Personally known to me, or ☐ Produced Identification:

(type of identification)

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN 95 AUG 26 ATTI: 27 THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

TALLAHASSES FLORIDA

Pursuant to Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

That WARRANTY SAFEGUARD SYSTEMS, INC., desiring to organize under the laws of the State of Florida, with its Registered Office as indicated in the Articles of Incorporation at 800 Corporate Drive, Suite 602, Fort Lauderdale, FL 33334, and Cort A. Neimark as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

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.

STATE OF FLORIDA

COUNTY OF BROWARD

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Cort A. Neimark, to me known to be the person described as Registered Agent in and who executed the foregoing Articles of Incorporation and who swore and acknowledged that he executed the foregoing Articles of Incorporation for the purposes therein set forth.

WITNESS my hand \ and official seal.

Print, stamp or type as commissioned

Personally known to me, or

☐ Produced Identification:

(type of identification)

DEBRA L. PRESTIPINO

My Comm. expires Dec. 4, 1999 No. CC 515607

Bonded Thru Official Natury Serbies 1-(800) 723-0121

Notary Public, State of Florida