(0-(-96 96 OCT 11, AM 10: 56 DATE

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassec, FL 32314

SECRETARY OF STATE TALLAHASSEE, FLORIDA

00001963664

EAGLE LIQUIDATORS OF MIAM, I'RE: - PED FLAGLER STATION INC. (Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

**MAILING ADDRESS OF CORPORATION** - PHONE 261-5214 (305) Area Code Number

# P9600084880 TRANSMITTAL LETTER FILED

96 OCT 14 AM 10: 55

SECRE TARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: <u>E</u>	AGLE LIQUIDATOR	S OF MAM . Include suf	JC lix)
Enclosed is an original a	nd one(1) copy of the artic	eles 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
	٨	ADDITIONAL CO	PY REQUIRED
FROM:	HDRIAN G	od or typed)	<u></u>
	4401 SW 7	5 Ave Bay #	
·	Miam FL City, Sta	33.(55 te & Zip	
	305-261-52 Daytime Telep	hone number	<del></del>
			BA 1/5/9

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



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 9, 1996

**ADRIAN GOETT** 

5688 W FLAGLER ST MIAMI, FL 33134 LIDUIDITOLS OF MIAMI, TWO.

SUBJECT: RED FLAGLER STATION INC-

Ref. Number: W96000021310

We have received your document for RED FLAGLER STATION INC and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Your document is being returned as requested.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Pamela Hall **Document Specialist** 

Letter Number: 196A00045984

# ARTICLES OF INCORPORATION

FILED

96 OCT 14 AM 10: 55

The undersigned incorporator(s), for the purpose of forming a corporation under the files of Bisting Accorporation.

Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

EAGLE LIQUIDATORS OF MIAMI INC.

ARTICLE II PRINCIPAL OFFICE

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

4401 SW 75 AVE. BAY # 1 MIAMI FL 33155

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: \00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

ADRIAN GOFTT 6771 SW 4 ST MIAMI FL 33144

## 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):

ADRIAN GOETT 6771 SW 4 ST Miami FL 33144

The undersigned i	incorporator(s) has(l	have) executed these Articles of Inc	orporation this
day of _	OCTOBER	, 19_96	
(An additional arti	cle must be added if	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

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:	EAGLE	Liquipators	OF V	<u>liaui</u>	INC	=
2. The name and address of the register	red agent and c	office is:				_
ADRI	AN GOET	· [T		SECRE TALLAH	96 OCT	
(P.O. Box o	SW 4	ST NOT ACCEPTABLE)		IARY OF S	4	
	TEL 3:			STATE Lorida	AH 10: 55	
Having been named as registered ago	ent and to ac	cept service of pr	ocess for	the aho	ve sta	nted
corporation at the place designated in t agent and agree to act in this capacity. relating to the proper and complete perj obligations of my position as registered	his certificate, I further agre formance of my	I hereby accept the se to comply with to	e appoint he provis	tment as re ions of al	egistei I statu	red ites
	6		10/10	/90		
(SIGNATURE)		(DA1	E) (			-

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

(DATE)