P96000096609

*./	CAPITOL SERVICES	d/b/a RNEY SERVICE BUREAU, INC.		DIVISION TARY OF STATE OF STAT
-	(Requestor's Na 1406 Hays Street (Address) Tallahassee, FL (City, State, Zi	, Suite 2 32301 (904) 656-3992	OFFICE USE ONLY	
1	1. C.G.S. (Corpora	ME(S) & DOCUMENT NUMBE	CR(S) (if known): (Document #)	,
	Walk in P	don Name) ick up time	(Document #) (Document #) Certified Copy Certificate of State	18
7	NEW FILINGS	Amendment	1000	120029311 1/13/9601095023 **122.50 ****122.50
4	NonProfit	Resignation of R.A., Officer/Dia	ector	
+	Limited Liability	Change of Registered Agent		
╅	Domestication	Dissolution/Withdrawal		
╁	Other	Merger		
1				•

OTHER FILINGS Annual Report Fictitious Name Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

W94-24013 Examiner's Initials

CR2E031(10/92)

D. BROWN NOV 2 7 1996

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

Please Back Date

November 13, 1996

CAPITOL SERVICES

TALLAHASSEE,

SUBJECT: C.G.S., INC

Ref. Number: W960001 24 213

We have received your document for C.G.S., INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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

If you have any questions concerning the filing of your document, please call (904) 487-6067.

Neysa Culligan Document Specialist

Letter Number: 496A00051779

RECEIVE

ARTICLES OF INCORPORATION



ZIP 33067

of /, o _c ****
C. G. S. of Ft. Lauderdale, Inc.
(name of corporation)
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.
ARTICLE I - CORPORATE NAME The name of the corporation is:
C. G. S. of Ft. Lauderdale, Inc.
ARTICLE II - DURATION
This corporation shall exist perpetually unless dissolved according to Florida law.
ARTICLE III - PURPOSE
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.
ARTICLE IV- CAPITAL STOCK
The corporation is authorized to issue <u>one hundred</u> shares (100) of <u>Common Stock</u> Collar(s) (\$) par value Common Stock, which shall be designated "Common Shares".
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT
The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:
and the state of

CITY	Coral S	Springs,	FLORIDA	
The crincipal	office if known	or the mailing	address of the corporation is:	

5614 N.W. 64th Lane

ADDRESS .

NAME	Christine Kind		
ADDRESS	5614 N.W. 64th Lane		
СПҮ	Coral Springs,	FLORIDA	ZIP 33067

APTICLE VI. INITIAL BOARD OF DIRECTORS

NAME	Christine Kind		<u> </u>
ADDRESS	5614 N.W. 64th Lane		·····
СПҮ	Coral Springs,	STATE_Florida.	ZIP 33067
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
СПХ		STATE	ZIP
	ddresses of the incorporators signing the	I - INCORPORATORS ese Articles of Incorporation are as follow	ws:
NAME	ddresses of the incorporators signing the	ese Articles of Incorporation are as follows:	ws:
NAME ADDRESS	Christine Kind 5614 N.W. 64th Lane	ese Articles of Incorporation are as follows:	
NAME ADDRESS	ddresses of the incorporators signing the	ese Articles of Incorporation are as follows:	
NAME ADDRESS CITY NAME	Christine Kind 5614 N.W. 64th Lane	ese Articles of Incorporation are as follows:	ws: ZIP 33067
NAME ADDRESS CITY NAME ADDRESS	Christine Kind 5614 N.W. 64th Lane	ese Articles of Incorporation are as follows:	ZIP 33067
NAME ADDRESS CITY NAME ADDRESS CITY	Christine Kind 5614 N.W. 64th Lane	ese Articles of Incorporation are as follows:	
	Christine Kind 5614 N.W. 64th Lane	ese Articles of Incorporation are as follows:	ZIP 33067

_(Seal)



CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

G.	s.	of	Ft.	Louderdale,	Inc.		
				(name of corpora	tion)		

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at5614 N	W. 64th Lane		· · · · · · · · · · · · · · · · · · ·	
Coral S	Springs, Florida.	33067		
			Þ,	
has named	Christine Kin	d		
located at the afor	esaid address, as its Regi	stered Agent to a	ecept service of proces	s within
thic state				

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

THE Ruston To The (registered agents)