

P9700000 8323

TRANSMITTAL LETTER

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

SUBJECT: JOSEPH HAND MEDIATIONS, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$ 122.50 (Filing Fee and Certified Copy).

900002065239-008-3  
\*\*\*\*122.50\*\*\*\*122.50

900002065239--3  
-01/22/97--01168--008  
\*\*\*\*122.50 \*\*\*\*122.50

FROM: JOSEPH HAND  
2094 N W 54th STREET  
FORT LAUDERDALE, FL 33308  
(954) 771-2732

FILED  
97 JAN 22 PM 4:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AL JAN 28 1997

**FILED**

ARTICLES OF INCORPORATION

97 JAN 22 PM 4: 23

OF

JOSEPH HAND MEDIATIONS, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

I. NAME: The name of the Corporation shall be:

JOSEPH HAND MEDIATIONS, INC.

II. PRINCIPAL OFFICE: The principal place of business and mailing address of this corporation shall be:

2094 N W 54th STREET  
FORT LAUDERDALE, FL 33308

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

100 SHARES

IV. INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and address of the initial registered agent is:

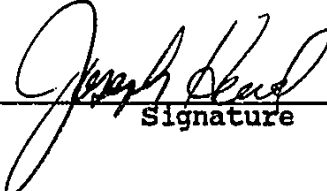
JOSEPH HAND  
2094 N W 54th STREET  
FORT LAUDERDALE, FL 33308

V. INCORPORATORS:

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

JOSEPH HAND  
2094 N W 54th STREET  
FORT LAUDERDALE, FL 33308

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 18 day of Jan, 1997.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**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.*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the corporation is:

JOSEPH HAND MEDIATIONS, INC.

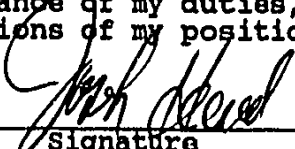
2. The name and address of the registered agent and office is:

JOSEPH HAND

2094 N W 54th STREET

FORT LAUDERDALE, FL 33308

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.

  
\_\_\_\_\_  
Signature

1/18/97  
Date