

P97000012790



THE UNITED STATES  
CORPORATION  
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 249309 80732A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : February 5, 1997

ORDER TIME : 10:49 AM

ORDER NO. : 249309-005

CUSTOMER NO: 80732A

CUSTOMER: Peter T. Hofstra, Esq  
DELOACH & HOFSTRA, PA

8640 Seminole Boulevard

Seminole, FL 34642

DOMESTIC FILING

NAME: LARB, INC.  
~~LRP, INC.~~

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Todd Sterzoy

EXAMINER'S INITIALS:

W97-2893  
KL 25  
2-10-97

900002078719--S  
-02/05/97--01066--009  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

FILED  
97 FEB -5 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
97 FEB -5 AM 11:17  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 5, 1997

CSC NETWORKS  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2607

SUBJECT: LRP, INC.  
Ref. Number: W97000002893

RECEIVED  
96 FEB -7 PM 12:20  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for LRP, INC. and your check(s) totaling \$70.00. 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.

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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) 487-6932.

Kimberly Rolfe  
Document Specialist

Letter Number: 497A00006098

**RESUBMIT**  
Please give original  
submission date as file date.

**ARTICLES OF INCORPORATION**  
**OF**  
**LARB, INC.**

**FILED**  
**97 FEB -5 AM 9:21**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

The undersigned, acting as incorporators to these Articles of Incorporation, hereby associate themselves together to form a corporation under the laws of the State of Florida.

**ARTICLE I**  
**NAME AND ADDRESS**

The name of the corporation is: LARB, INC. The physical address of the corporation is 8050 Seminole Office Center, #322, Seminole, Florida 33772. The mailing address of the corporation is P.O. Box 3516, Seminole, Florida 33775.

**ARTICLE II**  
**NATURE OF BUSINESS**

The purpose of this corporation is to engage in any activities or businesses permitted under the laws of the United States and the laws of the State of Florida.

**ARTICLE III**  
**CAPITAL STOCK**

The corporation is authorized to issue seven thousand five hundred (7,500) shares, at a par value of One Dollar (\$1.00) per share. This stock shall be classed as follows:

Class A Common Stock, consisting of three thousand seven hundred fifty (3,750) shares shall have exclusive voting power.

Class B Common Stock, consisting of three thousand seven hundred fifty (3,750) shares, shall not be entitled to any voice in the management of the corporation, nor to any voting powers. The sole management of the corporation shall be in the hands of the holders of Class A common stock and they alone shall be entitled to vote.

**ARTICLE IV**  
**TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V**  
**REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the initial registered office of this corporation in the State of Florida is 8640 Seminole Boulevard, Seminole, Florida 33772.

The initial registered agent of this corporation is Peter T. Hofstra.

**ARTICLE VI**  
**DIRECTORS**

The corporation shall have three (3) directors initially. The number of directors may be increased or diminished from time to time, by amendment to the By-Laws, but shall never be less than one (1).

**ARTICLE VII**  
**INITIAL DIRECTORS**

The names and street addresses of the members of the first Board of Directors are:

<u>NAME</u>	<u>ADDRESS</u>
Sheldon L. Rothman	P.O. Box 3516 Seminole, Florida 33775
Steven Beatty	P.O. Box 3516 Seminole, Florida 33775
Leslie Ann Rothman	P.O. Box 3516 Seminole, Florida 33775

**ARTICLE VIII**  
**INCORPORATORS**

The names and street addresses of the incorporators of these Articles of Incorporation are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Sheldon L. Rothman	P.O. Box 3516 Seminole, Florida 33775

**ARTICLE IX**  
**INDEMNIFICATION**

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

**ARTICLE X**  
**AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of

Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a majority of the stock entitled to vote thereon, unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

**ARTICLE XI**  
**DATE OF INCEPTION**

The date the corporate existence shall begin is as of the date of filing and acceptance of these Articles by the Secretary of State of Florida.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, acknowledged and filed the foregoing Articles of Incorporation under the laws of the State of Florida, this 21st day of January, 1997.

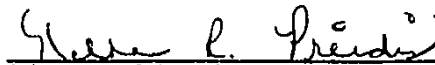
  
\_\_\_\_\_(SEAL)  
SHELDON L. ROTHMAN

STATE OF FLORIDA  
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 21st day of January, 1997, by SHELDON L. ROTHMAN, who is (personally known to me) or who has produced \_\_\_\_\_ as identification.



Nelda R. Preidis  
MY COMMISSION # CCS77363 EXPIRES  
August 14, 2000  
BONDED THRU TROY FARM INSURANCE, INC.

  
\_\_\_\_\_  
(Signature of Notary)

**NELDA R. PREIDIS**

\_\_\_\_\_  
(Name of notary, printed or stamped)


Notary Public

\_\_\_\_\_  
(Serial Number, if any)

**ACCEPTANCE OF REGISTERED AGENT**

Having been named to accept service of process for the above-named corporation, at the place designated in these Articles

of Incorporation, I hereby accept to act in this capacity, and agree to comply with the provisions of the laws of the State of Florida relative to keeping open said office.

  
\_\_\_\_\_  
PETER T. HOFSTRA, Registered Agent

corp\lrh.inc

FILED  
97 FEB -5 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA