

SUBJECT:

Tools For Schools Distributors, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

\$78.75

Filing Fee Filing Fee

& Certificate

□\$122.50

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

\*\*\*\*131.25 \*\*\*\*131.25

& Certificate

ADDITIONAL COPY REQUIRED

FROM:	Ivan Possner
	Name (Printed or typed)
	10433 N.W.6th Ct.
	Address 33071
	Coral Springs, Fl. 38071
	City, State & Zip
	1 (954) 344-0555
	Daytime Telephone number
	$\times$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Tools For Schools Distributors, Inc

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SEVAE PAN 1: STATE
TALLAHASSEE FLORID,

ARTICLE II PRINCIPAL OFFICE

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

10433 N.W.6th Ct.<sub>33071</sub> Coral Springs, Fl. 38071

ARTICLE III SHARES

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

100 Shares

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

Ivan Possner 10433 NW 6th Ct. Coral Springs, Fl. 33071

## 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):

Ivan Possner 10433 NW 6th Ct. Coral Springs, Fl. 33071

Fran Possner 10433 NW 6th Ct. Coral Springs, Fl. 33071

The undersigned incorp	rator(s) has(have) executed these Articles of Incorporation	thi
21st day ofM	nrch , 19 97 .	
(An additional article m	st be added if an effective date is requested.)	
	van Possa	
	/ Signature	
	L Pa.	
	non lover	
()	Signature	
v		
	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_	Tools For Schools Distributors, Inc.	7 MAR 21 PH SECKLIANAS SEE
2.	The name and address of the re	gistered agent and office is:	1: 33 STATE LORIDA
		Ivan Possner	
		(NAME)	_
		10433 N.W. 6th Ct.	
	(P. C	D. Box or Mail Drop Box NOT ACCEPTABLE)	
		Coral Springs, Fl. 33071	
	-	(CITY/STATE/ZIP)	<del>_</del>

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) 3/21/97
(DATE)