

ACCOUNT NO. : 072100000032

REFERENCE: 315865 162199A

AUTHORIZATION:

COST LIMIT : \$ PPD

ORDER DATE: April 2, 1997

ORDER TIME : 11:0 AM

ORDER NO. : 315865-005

CUSTOMER NO: 162199A

700002131687--5

-04/02/97--01095--028 \*\*\*\*122.50 \*\*\*\*122.50

CUSTOMER: Rick M. Morse, Cpa

RICK M. MORSE, CPA, P.A.

Suite 204

7800 N. University Drive

Tamarac, FL 33321

DOMESTIC FILING

NAME:

P.C. PROFESSOR OF BROWARD

COUNTY, INC.

EFFECTIVE DATE:

XX \_ ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_ CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Todd Sterzoy

EXAMINER'S INITIALS:

FILED

## ARTICLES OF INCORPORATION

97 APR -2 PM 1:29

OF

SEU... STATE TALLAHASSEE, FLORIDA

P.C. PROFESSOR OF BROWARD COUNTY, INC.

# ARTICLE I

#### NAME

The name of this Corporation shall be :

P.C. PROFESSOR OF BROWARD COUNTY, INC.

#### ARTICLE II

## **PURPOSE**

This corporation is organized for the purpose of SALES, TRAINING, & REPAIR and transacting any and all lawful business.

#### ARTICLE III

# CAPITAL STOCK

This corporation is authorized to issue 2500 shares of \$ 1 par value common stock.

## ARTICLE IV

# INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office of this corporation is:

10689 NW 48TH STREET CORAL SPRINGS, FL 33076

and the name of the initial registered agent of this corporation at the above address is:

#### KAREN REBACK

## ARTICLE V

## **DIRECTORS**

This corporation shall have one Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name and address of the initial Director of this corporation is:

KAREN REBACK 10689 NW 48TH STREET CORAL SPRINGS, FL 33076

## ARTICLE VI

## INCORPORATOR

The name and address of the person signing these Articles is:

KAREN REBACK 10689 NW 48TH STREET CORAL SPRINGS, FL 33076

## ARTICLE VII

#### POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

#### ARTICLE VIII

## **INDEMNIFICATION**

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

# ARTICLE IX

# **AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this 28 day of march

Karen Reback

STATE OF FLORIDA COUNTY OF BROWARD

I HEREBY CERTIFY that on this 2 DAY of WALL KAREN REBACK appeared before me the undersigned authority, to me well known and known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same, freely and voluntarily for the purpose therein expressed.

Notary Public

ss: My Commission Expires:



CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED;

P.C. PROFESSOR OF BROWARD COUNTY, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF CORAL SPRINGS, FLORIDA HAS NAMED KAREN REBACK AT 10689 NW 48TH STREET, CORAL SPRINGS, FLORIDA 33076 AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

CORPORATE OFFICER

TITLE >

. . .

DATE > 71 ) ONCH 38 199 1

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

TORE AT 1

DATE \* W ) (1) (1) 28, 1997