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Date

8/14/97

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

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-08/18/97--01075--018  
\*\*\*\*122.50 \*\*\*\*122.50

Re: Barb ra & Associates, Inc.  
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Barb ra Marlin  
(individual's name)

Barb ra & Associates, Inc.  
(name of corporation)

FILED  
97 AUG 18 PM 3:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 19 1997

MAILING ADDRESS OF CORPORATION		
10739 NW 37th Place		
Sunrise, Fl. 33351		
PHONE		
( 954 )	572-8787	
Area Code	Number	Ext.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

of

Barbra & Associates, 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:

Barbra & Associates, 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 one hundred shares ( 100 ) of one  
Dollar(s) (\$ 1.00 ) par value Common Stock, which shall be designated "Common Shares."

*ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT*

The principal office, if known, or the mailing address of the corporation is:

NAME: <u>Barbra &amp; Associates, Inc.</u>			
ADDRESS <u>10739 NW 37th Place</u>			
CITY	<u>Sunrise</u>	FLORIDA	ZIP <u>33351</u>

The name and street address of the initial Registered Agent of this Corporation is:

NAME: <u>Barbra Marlin</u>			
ADDRESS <u>10739 NW 37th Place</u>			
CITY	<u>Sunrise</u>	FLORIDA	ZIP <u>33351</u>

*ARTICLE VI - INITIAL BOARD OF DIRECTORS*

This corporation shall have one ( 1 ) directors 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 (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME: <u>Barbra Marlin</u>			
ADDRESS <u>10739 NW 37th Place</u>			
CITY	<u>Sunrise</u>	STATE <u>Fl.</u>	ZIP <u>33351</u>
NAME:			
ADDRESS:			
CITY		STATE	ZIP
NAME:			
ADDRESS:			

# ARTICLE VII - INCORPORATORS

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

NAME	Barb ra Marlin Dir/Pres/Sec		
ADDRESS	10739 NW 37th Place		
CITY	Sunrise	STATE	Fl. ZIP 33351
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 14 day of July, 1997.

Barbara Marlin (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)

STATE OF FLORIDA )  
 ) SS  
 COUNTY OF Broward )

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Barb ra Marlin

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that She executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 14 day of July, 1997.

(Notary Seal)

Walter T. Samuelson  
 (Notary Public, State of Florida at Large)

My Commission expires:



Walter T. Samuelson  
 MY COMMISSION # CC334858 EXPIRES  
 February 20, 2000  
 BONDED THRU TROY FARM INSURANCE, INC.

CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT

FILED

97 AUG 18 PH 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF REGISTERED AGENT  
OF

Barbra & Associates, Inc.  
(name of corporation)

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

at 10739 NW 37th Place  
Sunrise, Fl. 33351

has named Barbra Marlin  
located at the aforesaid address, as its Registered Agent to accept service of process  
within this 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.

Barbra Marlin  
(registered agent)