TRANSMITTAL LETTER

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

SUBJECT:	Bluestein	£.	Company.	Inc.
SUBJECT:	Didcocari	u	COMPCHIA	IIIC.

(Proposed corporate name - must include suffix)

20000227

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

\$70.00 Filing Fee

\$78.75 Filing Fee

& Certificate

\$122.50

Filing Fee

& Certified Copy

\$131.25

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Alan Bluestein

Name (Printed or typed)

300 South Pine Island Road, Suite 219

Address

Plantation, Florida 33324

City, State & Zip

(954) 423-0060

Daytime Telephone number

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

# ARTICLES OF INCORPORATION

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

## ARTICLE I

The name of the corporation shall be:

Bluestein & Company, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

300 South Pine Island Road, Suite 219 Plantation, Florida 33324

#### ARTICLE III SHARES

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

500 (Five Hundred)

### ARTICLE IV <u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

Alan Bluestein 300 South Pine Island Road, Suite 219 Plantation, Florida 33324

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Alan Bluestein 300 South Pine Island Road, Suite 219 Plantation, Florida 33324

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 gll 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 Acy 1997
Date

Signature/Registered Agent