

EJM Law Forms and Paralegal Services, Inc.

P9700008354

September 23, 1997

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

RE: PALM SHORES PROFESSIONAL SERVICES, INC

Dear Sir:

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for filing fee in the amount of \$70.00.

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PLEASE RETURN THE STAMPED COPY OF ARTICLES TO:

ELIZABETH J. MONTGOMERY 6211-1 BAY CLUB DR FT. LAUDERDALE, FL 33308

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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 NAME

The name of the corporation shall be:

PALM SHORES PROFESSIONAL SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

1859 N. PINE ISLAND RD, SUITE 233 PLANTATION, FL 33322

97 SEP 25 AH II: 34

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

1859 N. PINE ISLAND RD, SUITE 233 PLANTATION, FL 33322

ARTICLE III SHARES

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

ONE THOUSAND (1000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JONI SCHAPLER 1859 N. PINE ISLAND RD, SUITE 233 PLANTATION, FL 33322

ARTICLE V OFFICERS AND DIRECTORS

Pres/Dir: Joni Schapler, 1859 N. Pine Island Rd, Ste 233, Plantation, FL 33322 Sec/Treas: Robert Venezia, 1859 N. Pine Island Rd, Ste 233, Plantation, FL 33322

ARTICLE VI INCORPORATOR

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

ELIZABETH J. MONTGOMERY 6211-1 BAY CLUB DR FT. LAUDERDALE, FL 33308

The undersigned incorporator has executed these articles of incorporation the 22nd day of September 1997.

Elizabeth J. Montgomery

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 o	rporation is: PALM SHORE	S PROFESSIONAL SERVICES,	INC
2. The name and ad	dress of the registered agent and o	ffice is:	97 SE
	JONI SCHAPLER		P 25
•	(NAME)		SEE
	1859 N. PINE ISLAI (P.O. Box or Mail Drop Box	•	AM II: 34 SEE, FLORIDA
	PLANTATION, FL 3 (CITY/STATE/		P
corporation at the pa agent and agree to a relating to the proper	l as registered agent and to acc ace designated in this certificate, act in this capacity. I further agre and complete performance of my sition as registered agent.	I hereby accept the appointment to comply with the provision	nent as registered Ons of all statutes
Jon 1	(Signature)	9/22/0 (DATE)	77