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CORPORATION(S) NAME

CR2E031 (R8-85)

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TRANSMITTAL LETTER

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

SUBJECT: HBAW	B, INC							
(Proposed corporate name - must include suffix)								
Enclosed is an origina	l and one (1) co	py of the articles of incorporation and a check	k					
for :	\$78.75	5 €\$122.50 □\$131.25						
Filing Fee	Filing Fee	Filing Fee Filing Fee, & Certified Copy Certified Copy						
	& Certificate	& Certificate						
	:	Additional Copy Required						
FROM:		(printed or typed)	9					
WISI PALM TRACE LANDINGS DR., #219								
Address .								
DAVIE, FL 33314								
City, State & Zip								
954-797-9134								
Davtime Telephone number								

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.

> NAME ARTICLE

The name of the corporation shall be:

HERWB, INC.

ARTICLE II & PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

6151 PALM TRACE LANDINGS DR., #219 DAVIE, FL 33314

SHARES ARTICLE III

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

100 No PAR VALUE

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

SIVA DASAN 4219 DAVIE, FL 38314

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):

SNA DASAN
LOISI PALM TRACE LANDINGS DR
#219
DAVIE, FL 33314

· The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

157 day of OCTOBER, 1997.

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

Signature Signature

Signature
Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERFIFICATE 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:	HBZWB, INC.	 	
2. The name and address of the regist	ered agent and office is:	······································	··
SIVA '	DASAN (NAME)	<u></u>	
6151 PALM (P.O. Box	TRACE LANDINGS	De. #219	
DAVIE,	FL 333/4 (City/State/Lip)		
Having been named as registered a corporation at the place designated in agent and agree to act in this capacities relating to the proper and complete probligations of my position as register	n this certificate, I hereby acc ty. I further agree to comply erformance of my duties, and	cept the appointm with the provisio	ent as registered ons of all statutes

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314