Department of State Division of Comorations

P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT:	The "N" Corporation (Proposed or	rporate name - must includ	ie suffix)	
	•		13820000 -19/27/91	0.343 0 51175-513 5 45648.75
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	S122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	Natalie Sirois Name (Printed or typed)			·
	2111 NW 77th Avenue			SE SEVER
Summise, Florida 33313 City, State & Zip (954) 776-9395 Daytime Telephone number				Toct (
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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 NAME

The name of the corporation shall be:

The "N" Corporation

ARTICLE II PRINCIFAL OFFICE

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

2111 NW 77th Avenue Surrise, Florida 33313

ARTICLE III SHARES

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

1,000

ARTICL: IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Natalie Sirois 2111 iW 77th Avenue Sunrise, FL 33313

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation (set

Natalie Sirois 2111 NW 77th Avenue Sumrise, Florida 33313

Signature/Incorporator

Data

(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 all 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

Signature/Registered Agent

Date