

Donna Barker, Owner

3424-18 Old St. Augustine Road Tallahassee, Florida 32311

Phone & Fax (904) 671-1741

97 DEC -5 PM 2: 32

SECRETARY OF STATE -TALLAHASSEE, FLORIDA

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### ARTICLES OF INCORPORATION

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OF

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ABRAMS ORGANIZATIONS, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

#### ARTICLE I NAME:

The name of the corporation shall be:

ABRAMS ORGANIZATIONS, INC.

# ARTICLE II PRINCIPAL OFFICE:

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

2090 Palm Beach Lakes Blvd. Suite 700 West Palm Beach, FL 33409

#### ARTICLE III SHARES:

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

1,000 Shares @ \$1.00

### ARTICLE IV REGISTERED AGENT:

The name and address of the initial registered agent is:

Mitchell L. Berkowitz, P.A.

2601 N. Ocean Ave.

Zooi N. Ocean Ave.

Suite F

Singer Island, FL 33404

#### ARTICLE V OFFICERS & DIRECTORS:

The name and address of the officers and/or directors are:

Thomas D. Abrams

2090 Palm Beach Lakes Blvd.

Suite 700

West Palm Beach, FL 33409
ARTICLE VI INCORPORATOR:

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

# ARTICLES OF INCORPORATION (Cont.)

# ARTICLE VI INCORPORATOR (cont.)

Donna Parker C/O Accurate Filing & Search Services 3424-18 Old St. Augustine Rd. Tallahassee, FL 32311

The undersigned incorporator has executed thses Articles of Incorporation this 5th day of December , 1997.

Donna Parker

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 obligatins of my position as registered agent.

SEE ATTACHED

12-5-97 (Date)

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

The name and addres of the registered agent and office is:

MITCHELL BERKOWITZ, P.A.

2601 N. Ocean Ave.

Suite F

Singer Island, FL 33404

Having been named as registered agent and to accept service of process, 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 relateing to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Makely Cuy

Mitchell Berkowitz,

12-5-97

Date