## 48 (TRACTION DE DO 2909)

Department of State

Division of Corporation P. O. Box 6327	s			
Tallahassee, FL 32314		•		M -9 PM 12: 04
SUBJECT:	Miller, Klend	worth + Asso orporate name - must includ	ociates, Inf	OL OL
			00002395 -01/09/98( *****78.75	01061004
Enclosed is an original a	and one(1) copy of the article	s 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 CO	PY REQUIRED	
FROM: Mark Klendworth Name (Printed or typed)				
	2443 Sund	4 AUC.	<del> </del>	e*
_	Delray Beach City,	FL 33444 State & Zip	ł	
	(561) 27 Daytime To	9-9904 elephone 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.

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ON 98 JAN -9 PH 12: 04
MIR: 04
TO RIONS

ARTICLE	I	NAME
	_	4 14 4A144A

The name of the corporation shall be:

Miller, Klendworth + Associates, Inc.

PRINCIPAL OFFICE ARTICLE II

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

2443 Sundy Ave. Delray Beach, FL 33444

ARTICLE III SHARES

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

Ninety

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

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

Barbara Miller 2443 Sundy Ave Delray Beach, FC 33444

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

Mark Klendworth

2443 Sundy Ave. Delray Beach, FL 33444

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 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