

P98000015515

Requestor's Name

PHILLIP L. GLICKMAN CPA
605 IVEY DAIRY ROAD 6103
NORTH MIAMI BEACH, FL 33179

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

600002431846--5
-02/16/98--01109--005
*****70.00 *****70.00

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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98 FEB 16 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/16/98
[Signature]

ARTICLES OF INCORPORATION

OF ...

MY MAILBOX, INC.

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

ARTICLE I NAME

The name of the corporation shall be:

MY MAILBOX, INC.

The principal place of business of this corporation shall be:

*2269 S. UNIVERSITY DRIVE
DAVIE, FLORIDA 33324-5823*

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TALLAHASSEE, FLORIDA

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: *500 SHARES, \$1.00 PAR VALUE*

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

*GERALD MARCOW, PRESIDENT
3300 NE 192ND STREET DIRECTOR
APT 1817
AVENTURA, FLORIDA 33180-2437*

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these articles of incorporation is(are):

GERALD MARCOW
3300 NE 192ND STREET APT 1817
AVENTURA, FLORIDA 33180-2437

IN WITNESS WHEREOF, the undersigned incorporator(s) has have executed these Articles of Incorporation this 9 day of FEBRUARY, 19 98.

Signature(s) of Incorporator(s)

Gerald Marcow

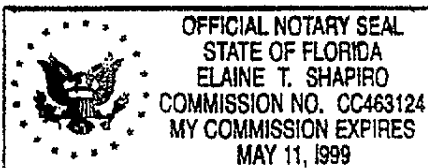
STATE OF FLORIDA

COUNTY OF BROWARD

THE FOREGOING instrument was acknowledged and sworn to before me this 12TH day of February, 19 98, by GERALD MARCOW
(Name of Incorporator)

of MY MAILBOX, INC.

(Name of Corporation)



Elaine T. Shapiro
Notary Public

(SEAL)

My Commission Expires: May 11, 1999

CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: MY MAILBOX, INC.

2. The name and address of the registered agent and office is:

PHILLIP L. GLICKMAN C.P.A.

605 IVES DAIRY ROAD 6103

(P. O. BOX NOT ACCEPTABLE)

NORTH MIAMI BEACH, FLORIDA 33179

(CITY/STATE/ZIP)

SIGNATURE _____

(Corporate Officer)

TITLE _____

PRESIDENT

DATE _____

2-9-98

98 FEB 16 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE _____

Phillip L. Glickman CPA

(Registered Agent)

DATE _____

2-9-98