

P98000019974

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

40000244474--3
-03/02/98-01149-012
*****78.75 *****78.75

SUBJECT: LIQUIDATORS INTERNATIONAL, INC.
(Proposed corporate name - must include suffix)

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: SAJI SEILY
Name (Printed or typed)
6740 NW 192nd LANE
Address
MIAMI, FLORIDA 33166
City, State & Zip
305-430-9149
Daytime Telephone number

FILED
98 MAR -2 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

Handwritten signature/initials

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:

LIQUIDATORS INTERNATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

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

7928 NW 66th STREET
MIAMI, FLORIDA 33166

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

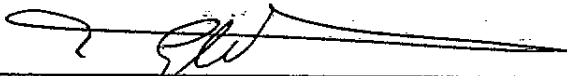
The name and Florida street address of the initial registered agent are:

SAJI SEELY
6740 NW 192nd LANE
MIAMI, FLORIDA 33015

ARTICLE V INCORPORATOR

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

SAJI SEELY
6740 NW 192nd LANE
MIAMI, FLORIDA 33015



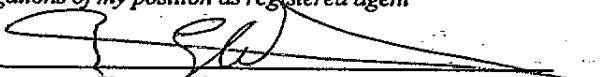
Signature/Incorporator

FEB 26th, 1998

Date

(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

FEB 26th, 1998

Date

FILED
MAR - 2 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA