# P98000023417

#### **Transmittal Letter**

**Department Of State** 

Division Of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Subject: SLIP, CRASH AND FALL, INC.

Enclosed is an original and one (1) copy of the

Articles Of Incorporation and a check for: \$122.50 for

filing fee and certified copy.

From: DAHLIA CANES

**5701 BISCAYNE BLVD.** 

**SUITE 601** 

MIAMI, FLORIDA, 33137.

(305) 323-3960.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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### OF SLIP, CRASH AND FALL, INC.

98 MAR I I AM 8:51 SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation hereby adopts the following Articles of Incorporation.

ARTICLE! (NAME)

The name of the corporation is SLIP, CRASH AND FALL, INC.

ARTICLE II (Duration)

The duration of this corporation is perpetual.

ARTICLE III (Purpose)

The general purpose for which this corporation is organized is to engage in the operation of INDEPENDENT CONTRACTING.

#### ARTICLE IV

(Initial registered office, registered agent, principal office and mailing address)

The street address of the initial registered office of this corporation is Slip, Crash and Fall, Inc., 5701 Biscayne Blvd., Suite 601, Miami, Florida 33137, and the name of the initial registered agent of this corporation at that address is Dahlia Canes. The principal office and mailing address of the corporation is 5701 Biscayne Blvd, Suite 601, Miami, Florida 33137.

ARTICLE V (Capital Stock)

This corporation is authorized to issue 500 shares of common stock with a par value of \$ 1.00 per share.

## ARTICLE VI (Initial Board of Directors)

This corporation shall have one Director initially. The number of Directors may be either increased or diminished from time to time by a majority of the shareholders present in person or by proxy at any annual or special meeting of the shareholders but shall never be more than (3) Directors nor less than one. The names and addresses of the initial Directors of this corporation are:

Dahlia Canes 5701 Biscayne Blvd. Suite 601 Miami, Florida 33137

ARTICLE VII (S Corporation Status)

This corporation has authorized its officers to take all action necessary to apply for Chapter Sub S corporation status.

ARTICLE VIII (Incorporators)

The name and address of the person signing these Articles is

Dahlia Canes 5701 Biscayne Blvd. Suite 601 Miami, Florida 33137

ARTICLE IX (Amendment)

This corporation reserves the right, subject to the approval of persons voting not less than two-thirds majority of the outstanding fully paid and non-assessable shares of the capital stock of the corporation, to amend or repeal any provision contained in these Articles of Incorporation, or any amendment to them, and any right conferred upon the shareholders, is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation on this  $\underline{\mathscr{S}}$  day of March, 1998.

of Incorporation on this day of March, 1998.		
Dahlia Canes		
STATE OF FLORIDA ) ) S.S. COUNTY OF DADE )		
On this day of March, 1998, before me personally appeared Dahlia Canes,		
Personally known to me an subscribed before me on this day of		
March, 1998; and also produced a valid Driver's License who executed the		
foregoing instrument, and acknowledged to me that he executed the same as his free		
act and deed, and who did take an oath.		
Sworn to before me, a Notary Public, this day of March, 1998.		
r	Aloria Wilcox Notary Public	
GLORIA WILCOX My Commission CC537113 Expires Mer. 04, 2000	Gloria Wilcox Print Name	
My commission expires:	CC 537113 Certificate Number	

March 04, 2000

#### ACCEPTANCE BY REGISTERED AGENT

The undersigned, being the person named as initial registered agent of Slip, Crash and Fall Inc., accepts the obligations thereunder. Executed this the day of March, 1998.

Dahlia Canes

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICES

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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.

1. The name of the corporation is:	SLIP, CRASH AND FALL, INC	
<ol><li>The name and address of the regis</li></ol>	stered agent and office is:	
	(Name) AYNE BLVD. , SUITE 601	
(P.O. Box or Ma MIAM	il Drop Box <u>NOT</u> acceptable) I, FLORIDA, 33137	
	city/State/Zip)	

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 provision 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)

neu 4, 1998 (Date)