

Charter Number Only

P98000029789

3/30/98

Requestor's Name

Address

City

State

ZIP

Phone

VALIDATION ONLY

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-04/01/98--01007--021
****122.50 ****122.50

CORPORATION(S) NAME

Assured Associates, Inc.

FILED
98 APR -1 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☒ Profit
☐ NonProfit
☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☒ Certified Copy
☐ Call When Ready
☐ Walk In
- ☐ Amendment
☐ Dissolution
☐ Annual Report
☐ Reservation
☐ Photo Copies
☐ Call If Problem
☐ Will Wait
- ☐ Merger
☐ Mark
☐ Other
☐ Change of Registered Agent
☐ Certificate Under Seal
☐ After 4:30
☒ Pick Up
☐ Mail Out

Name	
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DIVISION OF CORPORATION

Empire Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION

of

ASSURED ASSOCIATES, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

ASSURED ASSOCIATES, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK 500

The corporation is authorized to issue FIVE HUNDRED shares (~~500~~) of ONE DOLLAR Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>ASSURED ASSOCIATES, INC.</u>		
ADDRESS	<u>5992 N.W. 77th Drive</u>		
CITY	<u>Parkland,</u>	FLORIDA	ZIP <u>33067</u>

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>Barbara Levin</u>		
ADDRESS	<u>5992 N.W. 77th Drive</u>		
CITY	<u>Parkland</u>	FLORIDA <u>33067</u>	ZIP

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Barbara Levin</u>		
ADDRESS	<u>5992 N.W. 77th Drive</u>		
CITY	<u>Parkland,</u>	STATE <u>Florida.</u>	ZIP <u>33067</u>
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

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ARTICLE VII INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Barbara Levin		
ADDRESS	5992 N.W. 77th Drive		
CITY	Parkland	STATE	Florida. ZIP 33067
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 30 day of March, 19 98.

xxx Barbara Levin (Seal)
 _____ (Seal)
 _____ (Seal)

STATE OF FLORIDA)

SS

COUNTY OF _____)

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared _____

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that _____ executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this _____ day of _____, 19 _____.

(Notary Seal)

(Notary Public, State of Florida at Large)

My Commission expires: _____

CERTIFICATE AND KNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

ASSURED ASSOICATES, INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at ~~541 South State Road 7 Suite 1~~ 5992 NW 77th Dr
Margate, Florida 33068 Parkland, FI 33067

has named Barbara Levin
located at the aforesaid address, as its Registered Agent to accept service of process within
this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated
corporation at the place designated in this certificate, and being familiar with the obliga-
tions of that position, I hereby accept to act in this capacity, and agree to comply with the
provisions of Florida Law in keeping open said office.

Barbara Levin
(registered agent)

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TALLAHASSEE, FLORIDA