TRAMMITTA LETTER Department of State

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

SUBJECT:	RENTEX ASSOC (Proposed corpor	CTATES, INC. ate name - must include suf	fix)	·
		, 1	00002562 -06/17/98 *****78.75	2 761 ——2 01053—004 *****78.75
Enclosed is an original an	nd one(1) copy of the articles	of incorporation and a c	check for:	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate, PY REQUIRED	90 1111 17
FROM:	KATHRYN PRECI Name (Pr	inted or typed)	SEE FLOR	PH 3: 16
, 	505 BROADWAY	ST.		i o
	NEW ORLEANS, City, S	LOUISIANA 7011 State & Zip	8	
_	(504) 865-715 Daytime Te	57 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.

ARTICLE I NAME

The name of the corporation shall be:

BENTEX ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

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

2711 N. W. 17TH Ave. MIAMI, FLORIDA 33142

ARTICLE III SHARES

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

ONE HUNDRED SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

BENJAMIN F. CROSBY III 7425 WILSON RD. WEST PALM BEACH, FLORIDA 33143

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

BENJAMIN F. CROSBY III 7425 WILSON RD. WEST PALM BEACH, FLORIDA 33143

Signature/Incorporator

V

(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

Date