

**P98000059574**  
My Corporation Dot Com  
26500 West Agoura Road, Suite 361 Calabasas, California 91302  
<http://www.mycorporation.com>

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JUL -6 PM 4:05

June 25, 1998

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314  
ATT: Doris Brown; Document Specialist

500002565805--0  
-06/19/98--01083--010  
\*\*\*122.50 \*\*\*122.50

**Re: COHEN LIMITED, INC.**  
**Ref Number: W98000014250**

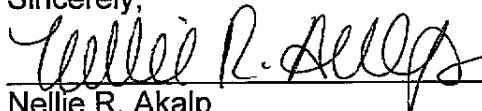
Dear Ms. Brown:

Please find enclosed for re-filing one original and one copy of the revised Articles of Incorporation of Cohen Limited, Inc. As requested, we have made the corrections in the corporate name by spelling out the word "Limited".

Please return the copy, stamped to show the date of filing, to the undersigned and if you have any question feel free to contact me at the numbers listed below.

Thank you for your patience.

Sincerely,



Nellie R. Akalp  
26500 West Agoura Road, Suite 361  
Calabasas, CA 91302  
(888)692-6771

789, 124, 255, 12550  
W98-14250

**D. BROWN JUL - 6 1998**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

June 23, 1998

NELLIE R. AKALP  
26500 WEST AGOURA ROAD  
SUITE 361  
CALABASAS, CA 91302

SUBJECT: COHEN LTD., INC.  
Ref. Number: W98000014250

We have received your document for COHEN LTD., INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE WORD LTD. ONLY APPLIES TO LIMITED PARTNERSHIP. IN ORDER TO USE THE WORD IT MUST BE SPELL OUT, IT CAN'T BE ABBREVIATED. THIS WORD SHOULD BE FOLLOWED BY YOUR CORPORATE SUFFIX.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6972.

Doris Brown  
Document Specialist

Letter Number: 798A00034253

**ARTICLES OF INCORPORATION**  
**OF**  
**COHEN LIMITED., INC.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JUL -6 PM 4:05

**ARTICLE I**

The name of the Corporation is Cohen Limited, Inc.

**ARTICLE II**

The principal place of business and mailing address of this corporation shall be  
9408 Beverlywood Street, Los Angeles, CA 90034.

**ARTICLE III**

The aggregate number of shares which the Corporation has authority to issue is  
1,500 shares of common stock with no par value.

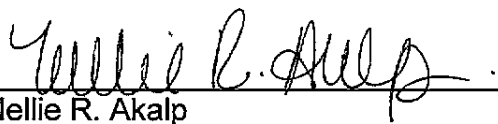
**ARTICLE IV**

The address of the initial registered office of the Corporation is 115 Lake Emerald  
Drive, Overland Park, Florida 33309, and the name of the Corporation's initial  
registered agent for service of process at such address is Jerry Kaufman.

**ARTICLE V**

The name and address of the incorporator to these Articles of Incorporation is:  
Nellie R. Akalp, 26500 West Agoura Road, Suite 361, Calabasas, CA 91302.

IN WITNESS WHEREOF, I have hereunto set my hand this 12<sup>th</sup> day of  
June, 1998.

  
Nellie R. Akalp

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JUL -6 PM 4:05

Pursuant to the provisions of sections 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.

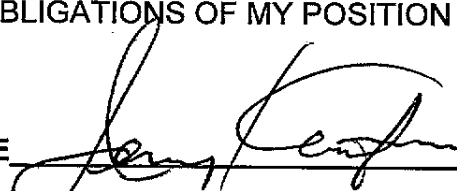
1. The name of the corporation is: Cohen Limited, Inc. (ML)
2. The name of the registered agent and office is:

**Jerry Kaufman**  
**115 Lake Emerald Drive**  
**Overland Park, Florida 33309**

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 \_\_\_\_\_

DATE \_\_\_\_\_

  
6-15-98