

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

Talialiassee,	19, 32314	
SUBJECT: _(Brandon Antique Liquidators, Inc. proposed corporate name)	· .
Enclosed ple above corpo	ease find an original and one (1) copy of the article ration and check in the amount of \$122.50	cles of incorporation for the
FROM:	Robert Medell Name	5000025802757 -07/06/9901001023 ****122.50 ****122.50
	1025 Sorolla Avenue Address	
	Coral Gables, FL 33134 City, State, & Zip	
	(<u>305</u>) <u>448-9493</u> Telephone Number	

Note: Additional copy of articles is needed when certified copy is requested.





ARTICLES OF INCORPORATION

OF

98 JUL -2 AM 10: 00

BRANDON ANTIQUE LIQUIDATORS, INC.

SECRETARY OF STATE TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Brandon Antique Liquidators, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1025 Sorolla Avenue Coral Gables, FL 33134

ARTICLE III CAPITAL STOCK

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

100 Shares of Common Stock, \$1 (One Dollar) Par Value.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Robert Medell 1025 Sorolla Avenue Coral Gables, FL 33134

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Robert Medell 1025 Sorolla Avenue Coral Gables, FL 33134

The under	rsigned has/have exe	cuted these Ar	ticles of Incorporatio	n this
	2974		JUNE	, 1998
			Drur	INCORPORTON DIAFETO,
			Signature/Tr	
			Signature/Ti	tle

Pursuant to the provisions of section 607.0501, 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, submits the following statement in designating the registered office/registered agent, in the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

- 2. The name and address of the registered agent and office is:

Robert Medell 1025 Sorolla Avenue Coral Gables, FL 33134

SIGNAT	CURE (corporate officer)
ritle _	DINECTOR
DATE_	6/29/98

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 _____6/29/98

REGISTERED AGENT FILING FEE: \$35.00