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| City/State | ASSOCIATES, INC. NIAB ROAD STE 209 arac, FL 33321 Zip Phone # | Office Use Only |
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| CORPORATION | NAME(S) & DOCUMENT | T NUMBER(S), (if known): |
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Examiner's Initials

CR2E031(1/95)

ARTICLES OF INCORPORATION OF

APARTMENT SPECIALISTS, INC.

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

ARTICLE I NAME
The name of the corporation shall be:

APARTMENT SPECIALISTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

7624 NW 99th AVENUE TAMARAC, FL 33321

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is

authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

DEBRA A. JALINAS 7624 NW 99th AVENUE TAMARAC, FL 33321

| | - |
|-----------------------------|--|
| B. Officers: President: | Debra A. Jalinas |
| Address: | 7624 NW 99th Avenue Tamarac, FL 33321 |
| Vice President: Address: | |
| Secretary: Address: | Debra A. Jalinas 7624 NW 99th Avenue |
| 71001033. | Tamarac, FL 33321 |
| | Tamarac, ID 33321 |
| Treasurer: Address: | |
| | may attach an addendum to the application listing eers and/or directors.) |
| 10. Name and | Street address of Florida registered agent: |
| | Name: Debra A. Jalinas |
| Office A | Address: 7624 NW 99th Avenue |
| | Tamarac, FI, 33321 |
| 11. Registered | City Zip Code agent's acceptance: |
| | en named as registered agent and to accept service |
| | for the above stated corporation at the place designated lication, I hereby accept the appointment as registered agent |
| and agree | to comply with the provisions of all statutes relative to the proper |
| and compl | ete performance of my duties, and I am familiar with and accept |
| | ions of my position as registered agent. agent's signature: |
| 90 days pi | s a certificate of existence duly authenticated, not more than ior to delivery of this application to the Department of State, |
| by the Sec | retary of State or other official having custody of corporate |
| 13. Delra | the jurisdiction under the law of which it is incorporated. |
| of the app | of Chairman, Vice Chairman, or any officer listed in number 9 plication) |
| 14. <u>Deln</u> (Na | me and capacity of person signing application) |

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ARTICLE V -INCORPORATORS

| 111 | Debra A Jali | | · | <u> </u> | <u> </u> | | |
|--------------------------|--|---------------|---------------------------------------|------------|----------------|---------------|---|
| Address_ | 7624 NW 99th | | | 22221 | | . • . | |
| City | TAMARAC | StateF | L Zip | 33321 | _ | | • |
| Name | - | | | | | | |
| Address | | | | | . | | |
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| | OF <u>FLORIDA</u> TY OF <u>BROWARI</u> | | | ÷ + + | - | | |
| COUN Before the St | TY OF BROWARI me, a Notary Pub ate and County set | lic authorize | personally | y appeared | nents in | | |
| COUN Before the St | TY OF BROWARI me, a Notary Pub | lic authorize | personally | y appeared | nents in | | er er sagers i sagementskrig stagementskrig |

(Notary Public, State of Florida at larger)

(Notary Seal)



My Commission expires: April 26, 2002

REGISTERED AGENT/REGISTERED OFFICE

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.

| 1. | The name of the corporation is: APARTMENT SPECIALISTS, INC. | | |
|----|--|--|------------|
| 2. | The name and address of the registered agent and office is: | 17 86 JI | > |
| | Debra A. Jalinas (Name) 7624 NW 99th Avenue (P.O. Box NOT acceptable) Tamarac, FL 33321 (City/State/Zip) Signature Dura A. Jalinas | L'27 PM 2: 15 ETARY OF STATE HASSEE, FLORIDA | 1.240 E.C. |
| | Title President | | |
| | Date June 1, 1998 | | |
| | | | |

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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature Delra U. Jales

Date June 1, 1998

REGISTERED AGENT FILING FEE: \$35.00