

Florida Department of State

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(((H98000023369 5)))

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: LLOYD GRANET Account Name Account Number : 074632001025 : (561)999-9300

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FLORIDA PROFIT CORPORATION OR P.A.

LKD COMPANY

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Lloyd Granet, Esq., 1900 NW Corporate Blvd. Suite 100 West Building, Boca Raton, FL 33431 Ph. 561-999-9300 - Fax 561-999-9400, Florida Bar No. 525431 AUDIT NUMBER -H98000023369 5

12/15/98

FAX AUDIT NO. H98000023369 5

ARTICLES OF INCORPORATION OF LKD COMPANY

98 DEC 15 PM 3 49
SECRETARY OF STATE
TALLANASSEE, FLORIDE

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation.

ARTICLE I. NAME The name of the corporation is LKD Company.

ARTICLE II. PRINCIPAL OFFICE

The principal place of business address and mailing address of this corporation shall be 6517 N.W. 39th Terrace, Boca Raton, Florida 33496.

ARTICLE IIL CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is 1000 shares of common stock having a par value of \$1.00.

ARTICLE IV. REGISTERED AGENT AND INITIAL REGISTERED OFFICE.

The name of the initial registered agent whose business office is identical to the registered office is: Ellen Jaffy.

The address of the registered office of the corporation is 6517 N.W. 39th Terrace, Boca Raton, Florida 33496.

The Board of Directors may from time to time move the registered office to any other address in the State of Florida.

ARTICLE V. BOARD OF DIRECTORS.

The Corporation shall have one (1) director initially. The number of directors may be increased or diminished from time to time, as provided in the bylaws adopted by the shareholders, but shall never be less than one.

ARTICLE VI. INITIAL DIRECTORS.

The name of the initial director of this Corporation and her street address is: Ellen Jaffy, 6517 N.W. 39th Terrace, Boca Raton, Florida 33496.

The person named as initial director shall hold office for the first year of existence of this Corporation or until she resigns or her successor is elected or appointed and qualified, whichever occurs first.

ARTICLE VII. INCORPORATOR.

The name and street address of the person signing these Articles of Incorporation is: Ellen Jaffy, 6517 N.W. 39th Terrace, Boca Raton, Florida 33496.

Lloyd Granet, Esq., 1900 NW Corporate Bivd. Suite 100 West Building, Boca Raton, FL 33431 Ph. 561-999-9300 - Fax 561-999-9400, Florida Bar No. 525431 AUDIT NUMBER -H98000023369 5

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ARTICLE VIII, AMENDMENT.

These Articles of Incorporation may be amended in the manner provided by law.

In witness whereof, the undersigned as Incorporator, has executed these Articles of Incorporation on the date set out below.

Date

STATE OF FLORIDA COUNTY OF PALM BEACH

Before me, a Notary Public, personally appeared Ellen Jaffy, to me known to be the person described as Incorporator and who executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to these Articles of Incorporation on the date set out above.

X Personally known or identified with_

Doreen Woodfall

Doreen Woodfall

Dougle No Commission CC736796

Expires April 28, 2002

Druck Noodfall

Replication CC736796

Notary Public State of Florida at Large Commission expiration:

(Notary Seal)

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98 DEC 15 PM 3 49 SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION 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: LKD Company

2. The name and address of the registered agent	and office is:	: Ellen Jaffy,	6517 N.W. 3	9 th Terrace,
Boca Raton, Florida 33496.	\bigcirc	\sim		

SIGNATURE

TITLE: Incorporator

DATE: 13/11/98

HAVING BEEN NAMED AS REGISTERED AGENT 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:

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