

P99000022410

TRANSMITTAL LETTER

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

100002796221--5  
-03/05/99--01084--018  
\*\*\*\*131.25 \*\*\*\*\*87.50

SUBJECT: SUPERIOR BUSINESS SERVICE INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: CHARMAINE DOLAN  
Name (printed or typed)

327 NW 43 rd STREET  
Address

POMPANO BEACH, FL 33064  
City, State & Zip

(954) 425-8449  
Daytime Telephone number

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

99 MAR -5 AM 8:52

FILED

NOTE: Please provide the original and one copy of the articles.

ajc  
2/11

## ARTICLES OF INCORPORATION

*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:

SUPERIOR BUSINESS SERVICES INC.

### ARTICLE II PRINCIPAL OFFICE

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

BUSINESS SKILLS CENTER  
533 S DIXI HIGHWAY  
DEERFIELD BEACH, FL 33441

### ARTICLE III SHARES

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

7,500 SHARES OF \$1 PAR VALUE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHARMAINE DOLAN  
327 NW 43 rd STREET  
POMPANO BEACH, FL 33064

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**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

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

CHARMAINE DOLAN

327 NW 43 rd STREET

POMPANO BEACH, FL 33064

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

2 nd day of MARCH, 1999.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
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: SUPERIOR BUSINESS SERVICES INC.
2. The name and address of the registered agent and office is:

CHARMAINE DOLAN  
(NAME)

327 NW43 rd STREET  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

POMPANO BEACH, FL 33064  
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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*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)

3/2/99  
(DATE)