

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

SUBJECT: _____FLOMARCON INC.

500002883966--4 -05/24/99--01084--005 ******78.75 ******78.75

	(Pr	oposed corporate r	name - must include suf	fix)	•	
Enclo	sed is an original	and one (1) co	py of the articles of	f incorporation a	nd a check	
for:	\$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	99 MAY 24 SECRETAR TALLAHASS	T.
	FROM:	HEINZ	TOPEL		PM FEF, F	E O
		Name (printed or typed)		3: 1 STAT LORN		
		2919 EAST COMMERCIAL BLVD STE A Address			3 - J	
	•					
	·	FT. LA				
		City, State & Zip				
		(954) 928-0707				
		Daytime	Telephone number			

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

of the

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.

> ARTICLEI NAME

The name of the corporation shall be:

FLOMARCON INC.

ARTICLE II PRINCIPAL OFFICE

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

2919 EAST COMMERCIAL BLVD STE A FT. LAUDERDALE, FL. 33308

ARTICLEIII SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time 100

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

> ALLEN H. KATZ PA 2919 EAST COMMERCIAL BLVD STE A FT. LAUDERDALE, FL. 33308

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):

HEINZ TOPEL 12318 HARBOUR RIDGE BLVD. PALM CITY, FLORIDA 34990

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

120 day of ma , 19

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

Aften And 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.

l.	The name of the corporation is: FLOMARCON INC.	
2.	The name and address of the registered agent and office is:	99 MAY SECRE TALLAI
	ALLEN H. KATZ PA	FIL AFFA AFFA AFFA
	(NAME)	SSR F III
	2919 EAST COMMERCIAL BLVD STE A	ERS 2
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	25 "
	FT. LAUDERDALE, FL. 33308	5A -
	(City/State/Zip)	· ·

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)