

P9900004844D

Accu-Tax + Acctg. Serv

Requestor's Name

P.O. Box 5032

Address

Deerfield Beach, FL 33442

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

100002884741-5  
-05/24/99-01156-015  
\*\*\*122.50 \*\*\*\*\*78.75

Examiner's Initials

**ARTICLES OF INCORPORATION  
OF**

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

**ARTICLE ONE**

The Corporate name is:

**SHARONA, INC**

The Corporation's principal office and mailing address is:

880 SW 10TH AVENUE  
BAY # 8  
POMPANO BEACH  
FLORIDA  
33069

FILED  
99 MAY 24 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE TWO**

**DURATION**

The duration of the Corporation is perpetual.

**ARTICLE THREE**

**PURCHASE**

The Corporation may transact any and all lawful business for which corporation may be incorporated under the Florida General Corporations Act.

**ARTICLE FOUR**

**CAPITAL STOCK**

The aggregate number of shares which the Corporation has authority to issue is 7,500 all of which shall be common shares with a par value of ten cents.

**ARTICLE FIVE**

**REGISTERED OFFICE**

The street address of the initial Registered Office of the Corporation is 880 SW 10TH AVENUE BAY #8, POMPANO BEACH, FL 33069 and the name of the initial Registered Agent at such address is MORRIS A. GIRNUN.

**ARTICLE SIX**

**DIRECTORS**

The business of the Corporation shall be managed by a Board of Directors consisting of a minimum of one director and a maximum of six directors. SHARONA ABADI IS appointed the first director.

**ARTICLE SEVEN**

**INCORPORATOR**

The name and address of the Incorporator is:

MORRIS A. GIRNUN

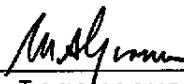
1810 SABEL DRIVE

DEERFIELD BEACH

FLORIDA 33442

(954) 574-0081

IN WITNESS WHEREOF. I have Subscribed my name this 8TH day of MAY, 1999.



Incorporator

STATE OF FLORIDA

County of BROWARD

On this 8TH day of MAY, 1999, before me personally appeared MORRIS A. GIRNUN known to be the persons whose name is subscribed to the within instrument, and acknowledged that he has executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.



Sharon S. Wood  
MY COMMISSION # CC549434 EXPIRES  
April 22, 2000  
BONDED THRU TROY FAIN INSURANCE, INC.

*Sharon S. Wood*  
\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires:

**CERTIFICATE OF REGISTERED AGENT**

Pursuant to 48.091 Florida Statutes, the following is submitted in compliance with said Act; that SHARONA, INC. desiring to organize under the laws of the State of Florida, with its principal place of business at 880 SW 10TH AVENUE BAY #8, POMPANO BEACH FL 33069 named MORRIS A. GIRNUN located at 880 SW 10TH AVENUE BAY # 8, POMPANO BEACH, FLORIDA 33069 as its agent to accept service of process within Florida.

**ACKNOWLEDGEMENT**

Having been named to accept service of process for the above stated Corporation at the place designated in the Certificate, I hereby agree to act in this capacity and to comply with provisions of said statutes relative to the proper and complete performance of my duties.

DATED: This 8TH day of MAY, 1999.

*M. Girnun*  
\_\_\_\_\_  
Registered Agent

FILED  
99 MAY 24 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA