# 05638

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

: (850)922-4001 Fax Number

From:

Account Name : HUBCO

Account Number : 104662003400 : (516) 935-3940

Phone : (516)935-3088 Fax Number

## FLORIDA PROFIT CORPORATION OR P.A.

Five R Us, Inc.

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Certificate of Status	
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B. McKnight JUN 2 2 1999

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#### ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

FIVE R US, INC

ARTICLE II PRINCIPAL OFFICE

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

FIVE R US, INC

C/O FRANZESE & BALIAN 136 BROADWAY WOODCLIFF LAKE, NJ 07675 99 JUN 22 PH 12: 56
SECRETARY OF STATE
SECRETARY OF

ARTICLE III SHARES

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

1500 SHARES at NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SIMON JALLO 1942 LAGO VISTA BLVD. PALM HARBOR, FL 34685

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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HUBCO INCORPORATIONS

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### ARTICLE V INCORPORATOR(S)

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

PAUL JALLO 9 OAKHIIL DRIVE JAMESBURG, NJ 08331

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

\_6 \_ day of \_\_18 \_\_\_ 19 \_\_99 \_\_.

PAUL JALLO Signature

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# 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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:	FIVE R US, INC
The name and address of the registe	red agent and office is:
	SIMON JALLO
	Name
	1942 LAGO VISTA BLVD.
	(P.O. Box or Mail Drop Box NOT Acceptable)
	PALM HARBOR, FL 34685
	(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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

SIMON JALLO

Date

Date

Signature

6-18-99

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