

P99000078706

Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To:
Division of Corporations
Fax Number : (850) 922-4001

From:
Account Name : WARD, DAMON & POSNER, P.A.
Account Number : 072262000447
Phone : (561) 842-3000
Fax Number : (561) 842-3626

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

Paxner, Inc.

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**ARTICLES OF INCORPORATION
OF
PAXNER, INC.**

THE UNDERSIGNED, acting as incorporator of a Corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such Corporation:

ARTICLE I - NAME

The name of this Corporation is: **PAXNER, INC.**

ARTICLE II - DURATION

The duration of this Corporation is perpetual.

ARTICLE III - PURPOSE

The purpose for which this Corporation is organized is to engage in any lawful act or activities for which corporations may be organized under the laws of the State of Florida.

ARTICLE IV - MAILING ADDRESS OF CORPORATION

The mailing address of the business is 4200 Georgia Avenue, West Palm Beach, Florida 33401 and the principal place of business of this Corporation is 4200 Georgia Avenue, West Palm Beach, Florida 33401.

ARTICLE V - STOCK

The aggregate number of shares which this Corporation shall have authority to issue is 10,000 shares of common voting stock.

Prepared by: Michael J Posner 4420 Beacon Circle, Suite 100
West Palm Beach, Florida 33407 Bar No: 525685
561/842-3000; Fax: 561/842-3626

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ARTICLE VI - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of this Corporation's initial registered office in Florida is 4420 Beacon Circle, Suite 100, West Palm Beach, Florida 33407 and the name of its initial registered agent at that address is Michael J Posner, Esq.

ARTICLE VIII - INCORPORATOR

The name and address of the incorporator is:

Name Address

Craig Maxner 4200 Georgia Avenue
West Palm Beach, FL 33401

DATED this 31st day of August, 1999.


Craig Maxner, Incorporator

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Craig Maxner, to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 31st day of August, 1999.

Notary Public State of Florida at Large

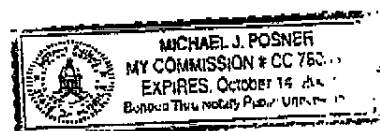
Sign: 

My Commission Expires:

Print: _____

Prepared by: Michael J Posner 4420 Beacon Circle, Suite 100
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**CERTIFICATE DESIGNATING PLACE OF
BUSINESS OR DOMICILE FOR THE SERVICE
OF PROCESS WITHIN THIS STATE NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED**

ACKNOWLEDGMENT:

Having been named to accept service of process for **PAXNER, INC.**, at the initial registered office of the Corporation in this State designated in its Articles of Incorporation, I hereby accept to act in this capacity and agree to comply with the provisions of Section 607.0505 Florida Statutes.

Date: August 31, 1999.



Michael J Posner

E:\MJP\MAXNER\PAKNER\PAKNER ART

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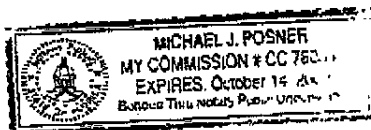
Sign: 

My Commission Expires:

Print: _____

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5618423626

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Michael J Posner

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