799 (TANSMITTALLETTER 30)

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

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SUBJECT:	LARSEN PART	DERS AND	COMPANY, Inc.
	(Proposed corpor	ate name - must include sur	ffix)
Enclosed is an origina	al and one(1) copy of the articles	s of incorporation and a	check for:
□ \$70.00	□ \$78.75	□ \$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
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		ADDITIONAL CO	3
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-	BOCA R	State & Zip	33431
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AUTHORIZATION BY PHONE	: TO		AHC SE T
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DATE			
DATE 979977 NOTE: Please provide the original and one copy of the articles 55			
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ARTICLES OF INCORPORATION
The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.
ARTICLE I NAME The name of the corporation shall be:
LARSEN PARTNERS AND COMPANY, INE.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
2878 NW 24th WAY BOCA RAYON, FIA. 33431
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
JOAN VINCENT
The name and Florida street address of the initial registered agent are: JOAN VIN CINT 2878 NW 2444 WAY BOCA RAYON, FIA. 3343/ ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
JOSEPH VINCENT 2878 NW 24th WAY
2878 NW 24 MWAY
M BOCA RAYON, FlA. 33431
9/2/99
Signature/Incorporator Date
(An additional article must be added if an effective date is requested.)

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/Registered Agent

Date