

# Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

EFFECTIVE DATE

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)541-3694
Fax Number: (305)541-3770

# FLORIDA PROFIT CORPORATION OR P.A.

sparer manufacturing, inc.

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\$78.75

SECRETARY OF STATE OF STATE OF CERPORATIONS



# ARTICLES OF INCORPORATION

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<u>of</u>

EFFECTIVE DATE

# SPARER MANUFACTURING, INC.

I, the undersigned incorporator of this corporation under Florida Statute 607, as amended, do hereby associate myself to form a corporation and adopt the following Articles of Incorporation.

### **ARTICLE I**

The name of this corporation is:

### SPARER MANUFACTURING, INC.

The mailing address for the Corporation is:

150 S. Pine Island Road, Suite 500, Plantation, Fl 33324

### ARTICLE II

### PURPOSE AND NATURE OF BUSINESS

The purposes of this corporation and general nature of the business to be conducted are as follows:

A. To engage in any business activity or endeavor which is lawful under the laws of the State of Florida, and the United States of America.

### ARTICLE III

#### **DURATION OF CORPORATION**

This corporation is to have perpetual existence commencing on the date of execution and acknowledgment of these Articles of Incorporation.

THIS INSTRUMENT PREPARED BY:
MAYNARD J. HELLMAN, ESQUIRE
FLORIDA BAR NO. 137411
150 S. PINE ISLAND ROAD, SUITE 500
PLANTATION, FLORIDA 33324
(954) 577-9177 - telephone
(305) 577-9883 - Gra

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### ARTICLE IV

## CAPITAL STOCK

The maximum number of shares of stock which this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares of Common Stock, each share having no par value.

### ARTICLE V

# INITIAL CAPITAL CONTRIBUTION

The amount of capital with which this corporation shall begin business shall not be less than Five Hundred (\$500.00) Dollars.

# ARTICLE VI

#### SUBSCRIBERS

The name and address of the subscriber of these Articles of Incorporation and the number of shares he has elected to take are as follows:

SUBSCRIBER

**ADDRESS** 

NUMBER OF SHARES

Maynard J. Hellman

150 S. Pine Island Road, Suite 500

1

Plantation, FL 33324

## <u>ARTICLE VII</u>

### DIRECTORS

The initial number of Directors of this corporation shall be two (2). The number of Directors may either be increased or decreased from time to time by a vote of the stockholders in conformity with the By-Laws of the Corporation but shall never be less than one (1).

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### ARTICLE VIII

# INITIAL BOARD OF DIRECTORS

The name and address of the member of the initial Board of Directors who, subject to the provisions of the Certificate of Incorporation, the By-Laws and the Corporation Laws of the State of Florida, shall hold office for the first year of the corporation's existence, or until his successor is elected and qualified, is:

NAME

**ADDRESS** 

Sol Sparer

5721 N.E. 2<sup>nd</sup> Avenue Miami, FL 33137

Brenda Hark

5721 N.E. 2<sup>nd</sup> Avenue Miami, FL 33137

### ARTICLE IX

## PREEMPTIVE RIGHTS

Every shareholder, upon the sale for each of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

#### ARTICLEX

# INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 150 S. PINE ISLAND ROAD, SUITE 500, PLANTATION, FLORIDA 33324, and the name of the initial Registered Agent of this corporation at that address is MAYNARD J. HELLMAN.

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### ARTICLE XI

### INDEMNIFICATION

The corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

DATED this 14TH day of October, 1999.

AYNARDU. HELLMAN

STATE OF FLORIDA )
COUNTY OF BROWARD )

BEFORE ME, the undersigned authority, personally appeared MAYNARD J. HELLMAN, to me well known to be the person described in and who executed the foregoing Certificate of incorporation, and who acknowledged before me, according to law, that he made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Plantation, Broward County, Florida, this 14th day of October, 1999.

Notary Public, State of Florida at Large

My Commission Expires:

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#### SPARER MANUFACTURING, INC.

CERTIFICATE DESIGNATING FLACE OF BOSINESS ON DOMICINS FOR THE FORFOSES OF
PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS
MAY BE SERVED
IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED:
FIRST, THAT SPARER MANUFACTURING, INC. IS DESIRING TO ORGANIZE OR
QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE
OF BUSINESS AT THE CITY OF MIAMI, STATE OF FLORIDA, HAS NAMED MAYNARD J.
HELLMAN, ESQUIRE, AT 150 S. PINE ISLAND ROAD, SUITE 500, PLANTATION, STATE OF
FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.  Signature:  MAYNARD J. HELLMAN  Title:  Director
Title: Director Property State: October 14, 1999
Having been named to accept services of process for the above stated corporation, at the place
designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with
the provisions of all statutes relative to the proper and complete performance of my duties.  Signature:  MAYNARD J. HELLMAN  (Registered Agent)
Piwpidocsiscsicorforatisparer add

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