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# Florida Department of State

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

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : TODD W. KLISTON, ESQ.

Account Number: 075221000013 : (954)473-4900

Fax Number : (954)473-4907

# FLORIDA PROFIT CORPORATION OR P.A.

BUSINESS FINANCING, INC.

Certificate of Status	0
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Page Count	06
Estimated Charge	\$70.00

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Composite Filings

# ARTICLES OF INCORPORATION OF BUSINESS FINANCING, INC.



The undersigned incorporator to these Articles of Incorporation, a natural person competent to contract, does hereby form a corporation under the laws of the State of Florida.

#### ARTICLE I

#### CORPORATE NAME

The name of the corporation is BUSINESS FINANCING, INC.

#### ARTICLE II

#### NATURE OF BUSINESS

The corporation may transact any lawful business for which corporations may be incorporated under the Florida Business Corporations Act.

#### ARTICLE III

#### CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is One Thousand (1,000) shares of common stock. The consideration paid for each share shall be fixed by the Board of Directors from time to time.

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## ARTICLE IV

#### CERTIFICATES

Shares of the corporation must be evidenced by the issuance of certificates. The form and content of the certificates shall be as prescribed by Florida Law.

#### ARTICLE V

#### **ADDRESS**

The initial street address of the principal office of this corporation is 100 East Linton Boulevard, Suite 203B, Delray Beach, Florida 33483.

#### ARTICLE VI

#### TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE VII

#### INDEMNIFICATION

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his being or having been a director, stockholder or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

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## ARTICLE VIII

#### INITIAL DIRECTOR

The name and address of the initial Director who shall hold office until his successor is elected and has qualified is:

Stephen J. Cohen

10437 Prestwick Road Delray Beach, Florida 33436.

#### ARTICLE IX

#### INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is as follows:

NAME

ADDRESS

Todd W. Kliston

8211 West Broward Boulevard, Suite 375 Plantation, FL 33324

## ARTICLE X

### REGISTERED OFFICE & REGISTERED AGENT

The street address of the corporation's initial registered agent is 8211 West Broward Boulevard, Suite 375, Plantation, Florida 33324 and the name of the initial registered agent at that office is Todd W. Kliston.

#### ARTICLE XI

#### EFFECTIVE DATE

The initial date of incorporation shall be effective on the date this document is filed as evidenced by the department of State's date and time endorsement on the original document.

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## ARTICLE XII

## **AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by Florida Law.

Date: 00 19,1999

Todd W. Kliston

# FAX AUDIT # # 4990000 36410

# ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

IN COMPLIANCE WITH SECTION 607.0403, FLORIDA STATUTES, THE FOLLWING IS SUBMITTED:

FIRST – BUSINESS FINANCING, INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF BOCA RATON, STATE OF FLORIDA, HAS NAMED TODD W. KLISTON, LOCATED AT 8211 WEST BROWARD BOULEVARD, SUITE 375, CITY OF PLANTATION, FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY STATE THAT I AM FAMILIAR WITH, AND ACCEPT THE OBLIGATIONS OF THIS POSITION.

SIGNATURE: (registered agent).

DATE: 10 19 (99