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(Business Entity Name)				
(Document Number)				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 31, 2007

JAMES T GRIFFIEN II 20130 OLD CUTTER RD CUTLER BAY, FL 33189

SUBJECT: SELECTIVE CUT, INC. Ref. Number: W07000025925

We have received your document for SELECTIVE CUT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes Document Specialist New Filing Section

Letter Number: 207A00037319

COVER LETTER

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

SUBJECT:	Selective a		
Enclosed are an orig	(PROPOSED CORPORA) ginal and one (1) copy of the artic		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status
FROM:	ZO130 old Cutler bay, Fl City,	l cutter Rd	
	786 38 C	O O SO	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

in compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Selective Cut, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. Box 565028, Miami, Florida 33256-5028 Mailing 20130 old cutter

The purpose for which the corporation is organized is:

Any legal purpose

ARTICLE IV SHARES

The number of shares of stock is:

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000.00 shares of One Dollar (\$1.00) per value each.

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

James T, Giffen II President/Secretary 20130 Old Cutler Rd Cutler Bay, Florida 33189

REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

James T. Giffen II 20130 Old Cutler Rd Cutler Bay, Florida 33189

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James T. Giffen II 20130 Old Cutler Rd Cutler Bay, Florida 33189

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Age

Signature/Incorporator