P94200082235

Attorney & Counselor at Law 725 N. Magnolia Ava. Orlando, Florida 32803

Phone (407) 425-1651 Fax (407) 423-8083 FILED

96 OCT -2 PH 1:12

SECRETARY OF STATE TALLAHASSEE. FLORIDA

October 1, 1996

FEDERAL EXPRESS

Socretary of State Division of Corporation 409 East Gaines Street Taliahassee FL 32301

RE: M

MAGIC TOUCH GIFTS, INC.

Gentlemen:

Enclosed is the original and one copy of the Articles of Incorporation of the above corporation, together with a check in the amount of \$122.50 to cover the following:

Filing fee \$ 35.00 Certified copy 52.50 Registered Agent

35.00

TOTAL:

Designation

\$122.50

Please return the certified copy to this office in the enclosed *FEDERAL EXPRESS* envelope.

Thank you for your attention as to this matter.

Sincerely yours.

Edward A. Kerben

EAK/Ih

Enclosures

XX 1456

-01032--009

****122.50

ARTICLES OF INCORPORATION

96 OCT -2 PH 1: 12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OF
MAGIC TOUCH GIFTS, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business

Corporation Act, hereby adopt the following Articles of Incorporation:

ARTICLE 1 -- NAME

The name of the corporation shall be MAGIC TOUCH GIFTS, INC.

ARTICLE II -- NATURE OF BUSINESS

- The general nature of the business of the corporation shall be operating a retail gift shop and any other lawful business.
- This corporation may engage in any activity or business permitted under the laws of the United States
 and of the State of Florida.

ARTICLE III - PRINCIPAL OFFICE AND MAILING ADDRESS

- 1. The principal place of business shall be 7601 BLACK LAKE ROAD, KISSIMMEE FL 34747.
- 2. The mailing address of this corporation shall be 5281 WEST IRLO BRONSON MEMORIAL HIGHWAY, KISSIMMEE FL 34746,

ARTICLE IV -- CAPITAL STOCK

The capital stock of this corporation shall consist of 100 shares of common stock with a per value of \$1.00.

ARTICLE V -- INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is HANI K. SOLOMON, 5281 WEST IRLO BRONSON MEMORIAL HIGHWAY, KISSIMMEE FL 34746.

ARTICLE VI -- DIRECTORS

The business of the corporation shall be conducted by a Board of Directors consisting of not less than one (1) director. The names and addresses of the directors are:

HANI K. SOLOMON 5281 W. IRLO BRONSON MEMORIAL HIGHWAY KISSIMMEE FL 34746 JAHID SALEM 11736 REEDY CREEK DRIVE, #108 ORLANDO FL 32836

ARTICLE VII -- INCORPORATORS

The name and address of the incorporator is:

HANI K. SOLOMON 5281 W. IRLO BRONSON MEMORIAL HIGHWAY KISSIMMEE FL 34746

ARTICLE VIII -- SHAREHOLDERS

The shareholders of this corporation shall have a pre-emptive right to acquire unissued or treasury shares of the corporative convertible into or carrying a right to subscribe to or acquire shares as issued by the corporation.

The undersigned have executed these Articles of Incorporation this 30 day of 30 tearly 1996	
	HANUK. SOLOMON
STATE OF FLORIDA	
COUNTY OF ORANGE	
The foregoing instrument was acknowledged HANI K. SOLOMON, who is personally known to m identification and who did take an oath.	before me this 30 day of September 1996, by e or who did produce N/A- as
NOTARY PUBLIC, STATE OF FLORIDA	[NOTARY RUBBER STAMP/SEAL]
Sign C	,
Print Edward A. Kerhen	Edward A. Kerben
	MY COMMISSION # CC5748C2 EXPIRES September 19, 2000 BOIDED THU TROY FAM INSURANCE, INC.

FILED

96 OCT -2 PH 1:12

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is MAGIC TOUCH GIFTS, INC.
- 2. The name and address of the registered agent and office is HANI K. SOLOMON, 5281 WEST IRLO BRONSON MEMORIAL HIGHWAY, KISSIMMEE FL 34746.

DATE: September 30, 1996

HANI K. SOLOMON

Incorporator/Director

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.

DATE: SEPHEMBER 30 , 1996

HANI K. SOLOMON

Registered Agent