# PO20000105495

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

LOOOD7534251---e -03/05/02--01023--014 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: P	(PROPOSED CORPORA	ATE NAME – MUST INCL	UDE SUFFIX)	<del></del> -	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:	1	
☐ \$70.00 Filing Fee	<ul><li>■ \$78.75</li><li>Filing Fee</li><li>&amp; Certificate of Status</li></ul>	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED		
FROM:					
Name (Printed or typed)  177 OCEAN LANE DRIVE, #1215  Address					
KEY BISCAYNE, FL 33149				-0	

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

City, State & Zip

Daytime Telephone number

305-986-3943

2544 WOZ-26181

of 10/102



TALLAHASSEE FLORIDA

## FLORIDA DEPARTMENT OF STATE 2002 SEP 30 PH 12: 34

Jim Smith Secretary of State

September 10, 2002

PATRICK SIMPSON-JONES 177 OCEAN LANE DRIVE #1215 KEY BISCAYNE, FL 33149

SUBJECT: P-A-P INC.

Ref. Number: W02000026181

We have received your document for P-A-P INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6973.

Claretha Golden **Document Specialist** New Filings Section

Letter Number: 402A00051854

#### ARTICLES OF INCORPORATION

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

### FILED

2002 SEP 30 PM 12: 34

SECRETARY OF STATE TALLAHASSEE FLORIDA

#### ARTICLE I NAME

The name of the corporation shall be:

PASADA Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1221 BRICKELL AVENUE, SUITE 900, MIAMI, FL 33131

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
THE MANUFACTURE, DISTRIBUTION & SALE OF THE REGISTERED PRODUCT
POST-A-PHOTO®

#### ARTICLE IV SHARES

The number of shares of stock is: 1.000

#### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): PATRICK SIMPSON-JONES 177 OOCEAN LANE DRIVE, #1215, KEY BISCAYNE, FL 333149

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

PATRICK SIMPSON-JONES 177 OCEAN LANE DRIVE, # 1215 KEY BISCAYNE, FL 33149

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

PATRICK SIMPSON-JONES 177 OCEAN LANE DRIVE, # 1215 KEY BISCAYNE. FL 33149

KEY BISCAYNE, FL 33149	
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Having been named as registered agent to accept service of process for th	
certificate, I/am familiar with and accept the appointment as registered ago	e above stated corporation at the place designated in this ent and agree to act in this capacity
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1 c Infan - Inen	99.02.02
Signature/Registered Agent	Date
LISHARON-NOUAS	
10 tribu-Lone	09 02 02
Signature/Incorporator /	Date
1. Stm PSON- 10NES	