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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 : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ICDS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION OF ICDS, INC.

OFER IN PHILE OF ALL PARTIES AND ALL PRINCIPLE OF ALL PRI

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ICDS, INC.

The principal place of business of this corporation shall be: 1244 s. ALHAMBRA CIRCLE CORAL GABLES, FL. 33146

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

1.000 SHARES 1.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

BARBARA L. BONARD 1244 S. ALHAMBRA CIRCLE CORAL GABLES, FL. 33146 WIL ZARECOR 1064 MYRTLE DRIVE DOUGLESVILLE, GA. 30034

MARTIN J. SIRACUSA 5336 VALLEY RIDGE AVE. LOS ANGELES, CA. 90043

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):
BARBARA L. BONARD 1244 S. ALHAMBRA CIRCLE CORAL GABLES, FL. 33146

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 11 day of FEBRUARY 2000

Signature(s) of Incorporator(s)

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation: ICDS, INC.			
2	. The name and office is:	address of the registered agent and	
	BARBARA L. BONARD	1244 S. ALHAMBRA CIRCLE	
		(P.O. BOX NOT ACCEPTABLE)	
	CORAL GABLES, FL.	33146	
	(CITY/STATE/ZIP)		
	SECRETARY OF STATE TALLAHASSEE, FLORIDA	SIGNATURE SEC - TRES.	

HAVING BEEN NAMED TO ACCEPT SERVICE 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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

DATE 2/1/2000