PHANTON 3//3

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

SUBJECT:	EA.	s'l Coast EMBlem	GRAPHICS INC.			
		(Proposed corpor	ate name - must include su	*0000314 -02/28/00- *****70.0	01125011	
Enclosed is an	origina	l and one(1) copy of the article	s of incorporation and a c	check for:	•	
∑ \$70. Filing F		\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: Descrick J Dimone Name (Printed or typed)						
119 NE 19th CT APT GIOF WILLOW MANGE'S FI. Address 33305 FIG 8						
		WILTON MANOR City, S	66-0109	RETARY OF A	FILED FILED AMII: 29	
		Daytime Te	lephone number	0805	: 29	

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

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ARTICLĖS OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I	NAME
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The name of the corporation shall be:

EAST Coast Emblen's ? Exaphics inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1130 5 POWERINE RD SOITE 107 (2)
DEERHAD BEACH, FL 33442

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Derrick Dimone 119 NE 19th CT UNIT G108 WILTON MANORS, FL 33365

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Derrick Dimene 119 NE 19th CT willow MANOR'S Fl. 33305

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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 1-23-00

Signature/Registered Agent

Date