POODO 41854

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 *****78.75 *****78.75 Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate Additional Copy Required FROM:

APR 2 6 2000

#10959

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

ARTICLES OF INCORPORATION

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

The name of the corporation shall be:	SE(00 Å	
Taylor's Place, Inc.	CHETARY OF STATE ANASSEE, FLORIC	30 APR 24 AM 10: 49	凹凹
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:	ORIDA ORIDA	0: L9	
Lauderhill, Florida 33313			
The number of shares of stock that this corporation is authorized to have outstais:	ınding a	t any (one tim

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Wanda Yates

Name (printed or typed)

1840 n.w. 42 Terr. Q302

Address

Laudexhill Florida 33313

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Wanda Yates
1840 n.w. 42 Terr, Q302.
Lauder hill, Fla 33313

	dersigned incorporator(s) has(have) executed these Articles of Incorporation this
2.0	day of 1000, 19 2000
	Wine Victor
	Signature
	Signature
	Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: \[\frac{7aylox's}{}{} \]	ace Inc.			
2. The name and address of the registered agent and office is:	-			
Winda Guts	OO APR 24			
1840 NW 42 nd Terr (P.O. Box or Mail Drop Box NOT ACCEPT				
<u></u>	TATE 1.49			
(CITY/STATE/ZIP)				
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.