

DAVID M. VOGEL, ATTORNEY AT LAW  
3150 NORTHEAST 190TH STREET, #205  
AVENTURA, FLORIDA 33180  
(305) 937-2502

e-mail - babutoo@aol.com

P0000000044443

SENT BY CERTIFIED MAIL, RETURN-RECEIPT REQUESTED TO:

Florida Department of State  
Corporation Division  
Tallahassee, Florida 32301

500003234895--0  
-05/02/00--01042--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Re: Articles of Incorporation - SWEET LORRAINE, INC.

Gentlemen:

Enclosed for filing is an original and one copy of the Articles of Incorporation for the above Florida corporation, together with an executed Designation of Registered Agent Form.

Upon filing, please forward to us a certified copy of the Articles of Incorporation together with the Certificate of Incorporation to the undersigned, as attorney for the Corporation, at the above Aventura, Florida address.

Also enclosed is a check in the amount of \$78.75 for payment of the following fees:

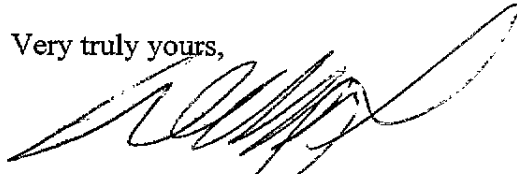
Filing Fee	\$ 35.00
Certified Copy	8.75
Resident Agent Designation Form	35.00
<b>Total:</b>	<b>\$78.75</b>

FILED  
00 MAY - 1 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If for any reason the above Articles may not be filed as submitted, please contact the undersigned.

Thank you for your cooperation.

Very truly yours,

  
DAVID M. VOGEL

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FILED

00 MAY - 1 PM 2:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SWEET LORRAINE, INC.**

**ARTICLES OF INCORPORATION**

The undersigned, desiring to incorporate a corporation under the provisions of the Florida Business Corporation Act, does hereby certify:

1. The name of the Corporation is:

**SWEET LORRAINE, INC.**

2. The principal mailing address of the Corporation is 311 S.E. Mizner Blvd., Suite 61, Boca Raton, FL 33442.

3. The aggregate number of shares of capital stock which the Corporation shall have the authority to issue is One Thousand (1,000) shares of common stock having a par value of One Dollar (\$1.00) each.

4. There shall be no preemptive rights with respect to any shares of stock of the Corporation.

5. The initial registered office of the Corporation shall be located at 3150 N.E. 190th Street, #205, Aventura, FL 33180, and the initial Registered Agent shall be DAVID M. VOGEL.

6. The name and address of the sole incorporator hereof is:

Name

Address

**LORRAINE M. RODOSTA**

**311 S.E. Mizner Blvd., Suite 61  
Boca Raton, FL 33442**

7. The initial Board of Directors shall be comprised of Two (2) members. The number of Directors may be either increased or diminished from time to time by the Bylaws but shall never be less than one (1).

The name and address of the initial Directors are:

Name

Address

**LORRAINE M. RODOSTA**

**311 S.E. Mizner Blvd.  
Suite 61  
Boca Raton, FL 33442**

DAVID FEINSTEIN

311 S.E. Mizner Blvd.  
Suite 61  
Boca Raton, FL 33442

8. The general nature of the business to be transacted by the Corporation shall be to engage in and to do any lawful act permitted under the laws of the United States of America and of the State of Florida.

9. The term for which the Corporation is to exist is perpetual.

10. The formation of the Corporation shall be effective as of the date hereof.

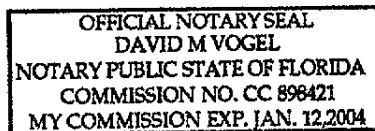
IN WITNESS WHEREOF, the undersigned has hereunto set her hand and seal this 26 day of April, 2000.

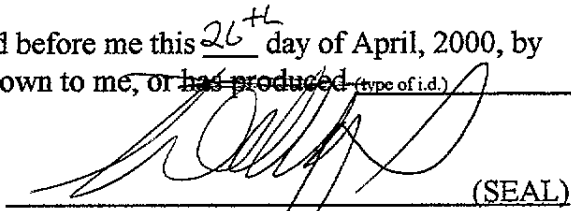
  
LORRAINE M. RODOSTA, Incorporator

STATE OF FLORIDA                     )  
  ): SS  
COUNTY OF MIAMI-DADE         )

The foregoing instrument was acknowledged before me this 26<sup>th</sup> day of April, 2000, by **LORRAINE M. RODOSTA**, who is personally known to me, or ~~has produced~~ (type of i.d.) \_\_\_\_\_ as identification.

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(SEAL)  
Notary Public, State of Florida

**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 is: **SWEET LORRAINE, INC.**
2. The name and address of the registered agent and office is:

**DAVID M. VOGEL**  
**P.O. BOX NOT ACCEPTABLE**

**3150 N.E. 190th Street, #205, Aventura, FL 33180**  
**(CITY/STATE/ZIP)**

SIGNATURE   
(corporate officer) (Incorporator)

TITLE Incorporator

DATE 4/26/2000

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.

SIGNATURE 

DATE April 26, 2000

**FILED**  
00 MAY - 1 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA