NORMAN S. PALLOT

ATTORNEY AT LAW : CERTIFIED MEDIATOR

7800 S.W. RED ROAD, SUITE #128

SOUTH MIAMI, FLORIDA 33143

PHONE: (305) 666-5997 FAX: (305) 663-3219 April 28, 2000

Secretary of State Corporation Division P.O. Box 6327 Tallahassee, Florida 32314

RE: ALL ICE LEASING, INC.

200003238082--4 -05/03/00--01125--010 *****122,50 *****78,75

I wish to file for incorporation of the above named entity.

Enclosed are Articles of Incorporation and Designation of Registered Agent, and my check for \$122.50 covering:

Filing Fee \$ 35.00 Certified Copy 52.50 Registered Agent 35.00

\$122.50

If there are any questions please call me collect.

Cordially yours,

Norman S. Pallot

NSP/jp Enclosures

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8: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3,80



ARTICLES OF INCORPORATION

<u>of</u>

ALL ICE LEASING, INC.

The undersigned subscribers to these Articles of Incorporation, each a natural person competent to contract, hereby associate themselves to form a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of this corporation is:

ALL ICE LEASING, INC.

ARTICLE II. NATURE OF BUSINESS

The general nature of the business to be transacted by this corporation is:

Sale and lease of ice machines and refrigeration equipment.

ARTICLE III. CAPITAL STOCK

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

50 shares of Common Stock without nominal or par value. The consideration for each share shall be fixed by the Board of Directors.

ARTICLE IV. INITIAL CAPITAL

The amount of capital which this corporation will begin business with is Five Hundred Dollars (\$500.00).

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. ADDRESS

The principal address, as well as the mailing address for the corporation is:

10777 N.W. 36 Avenue Miami, Florida 33167

and the initial Registered Agent at such address is OUIDA PURCHAS. The Board of Directors may, from time to time, move the principal office to any other address in Florida.

ARTICLE VII. DIRECTORS

This corporation shall have two Directors, initially. The number of Directors may be increased or diminished from time to time by by-laws adopted by the stockholders, but shall never be less than two.

ARTICLE VIII. INITIAL DIRECTORS AND OFFICERS

The names and post office addresses of the members of the first Board of Directors, the President, the Vice-President, Secretary and Treasurer, are:

OUIDA PURCHAS

10777 N.W. 36 Avenue

President,

Miami, Florida 33167

Director

HUGH BLACKBURN

10777 N.W.36 Avenue

Secretary-

Miami, Florida 33167

Treasurer,

Director

ARTICLE IX. SUBSCRIBERS

The name and post office address of each subscriber of these Articles of Incorporation, the number of shares of stock each agrees to take and the value of the consideration therefor (the sum of which value is not less than the amount of initial capital specified in Article IV.), are:

OUIDA PURCHAS

10777 N.W. 36 Avenue Miami, Florida 33167

(35 Shares)

\$350.00

HUGH BLACKBURN

10777 N.W. 36 Avenue Miami, Florida 33167

(15 Shares)

\$150.00

ARTICLE X. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the Stockholders, and approved at a Stockholders' Meeting by two-thirds of the stockholders entitled to vote thereon.

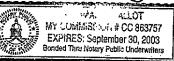
OÚIDA PURCHAS

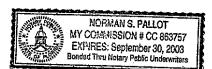
| STATE OF FLORIDA |) | | |
|------------------------------------|---------------------|----------------------|------------------------|
| | : SS: | | • |
| COUNTY OF MIAMI-DADE |) | | • |
| • | | | |
| | | | |
| | | | |
| I HEREBY CERTIFY that | on this day, before | me, a Notary Public | duly authorized in the |
| State and County named above to ta | ke acknowledgement | s, personally appear | ed OUIDA PURCHAS, |
| who is personally known to me, or | | | as identification, to |
| be the person described in and w | ho executed the for | egoing Articles of | Incorporation, and she |

WITNESS my hand and seal in the County and State named above this 14 day of May, 2000.

acknowledged before me that she subscribed to those Articles of Incorporation.

NOTARY PUBLIC, State of Florida





CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

| The name and address of the registered agent and office | is: |
|---|----------------|
| OVIDA PURCHAS | |
| (NAME) | SEC 3 |
| 10777 N.W. 36 Avenue | |
| (P.O. BOX <u>NOT</u> ACCEPTABLE) | مع دوري |
| Miami, FL 33167 | 277 G |
| (CITY/STATE/ZIP) | |
| SIGNATURE (corp TITLE President | orate officer) |

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.

DATE May 1, 2000