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 : HUBCO

Account Number : 104662003400 : (516)935-2940

Fax Number : (516)935-3088

FLORIDA PROFIT CORPORATION OR P.A.

Consignments U.S.A. Inc.

	1125
Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

B. McKnight JUL 0 7 2000

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.

ARTICLE I NAME

The name of the corporation shall be:

Consignments U.S.A. Inc.

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ARTICLE II PRINCIPAL OFFICE

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

Consignments U.S.A. Inc.

909 NE 5 STREET CRYSTAL RIVER, FL 34428

ARTICLE III SHARES

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

1500 Shares with No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FRANK ROMANELLI 909 NE 5 STREET CRYSTAL RIVER, FL 34428

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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ARTICLES V INCORPORATOR(S)

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

FRANK ROMANELLI 8 SORRENTO COURT MILLER PLACE, NY 11764

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

7th day of July 2000.

FRANK ROMANELLI

SIGNATURE

1. The name of the corporation is: Consignments U.S.A. Inc.

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

	·	
2. The name and address of th	e registered agent and office is:	
	FRANK ROMANELLI	Q DIV
	Name	
	909 NE 5 STREET	
	(P.O. Box or Mail Drop Box NOT Acceptable)	- 300 m

CRYSTAL RIVER, FL 34428

(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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Frank ROMANELLI SIGNATURE July 7th, 2000

(Date)