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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 922-4001

From: Account Name : SERBER & ASSOCIATES, P.A.
Account Number : I200000000083
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.
CUT N PLAY, INC.

Certificate of Status	1
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ARTICLES OF INCORPORATION OF

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CUT N PLAY, INC.

ARTICLE I.

CORPORATE NAME

The name of this corporation shall be:

CUT N PLAY, INC.

ARTICLE II.

NATURE OF CORPORATE BUSINESS

The Corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE III.

CAPITAL STOCK

This Corporation is authorized to issue a maximum of One Thousand (1,000) shares of common stock having a par value of One Dollars (\$1.00) per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

ARTICLE IV.

INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Corporation's initial Registered Agent and Registered Office in the State of Florida shall be:

Judith Bitchatchi
3300 N.E. 192nd Street, #705
Aventura, FL 33180

ARTICLE V.

MAILING ADDRESS OF CORPORATION

The Corporation's mailing address shall be:

3300 N.E. 192nd Street, #705
Aventura, FL 33180

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ARTICLE VI.

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BOARD OF DIRECTORS

The number of Directors may be altered from time to time by By-Laws adopted by the Stockholders. However, the Corporation shall have no less than one (1) Director at any time.

ARTICLE VII.

INITIAL DIRECTOR

The name and post office address of the first Director of the Corporation is:

Name	Address
Judith Bitcharchi	3300 N.E. 192 nd Street, #705 Aventura, FL 33180

The first Director shall hold office until the first annual meeting of the Stockholders of the Corporation.

THE UNDERSIGNED Incorporator, for the purpose of forming a Corporation to do business within the State of Florida, does make and file these Articles of Incorporation, hereby declaring and certifying that the facts stated are true.

Judith Bitcharchi
Judith Bitcharchi

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

BEFORE ME, the undersigned authority, appeared Judith Bitcharchi, who is personally known to me or who has produced _____ as identification, and acknowledged that he executed said Articles of Incorporation, and who did take an oath.

WITNESS my hand and seal in the State and County aforesaid, this 8th day August 2000.

NOTARY PUBLIC, State of Florida
Print Name: Matthew Wealcatch
My Commission Expires:



The undersigned hereby accepts the foregoing designation as initial Registered Agent and agrees to comply with the provisions of law applicable to said designation.

Judith Bitcharchi
Judith Bitcharchi, Registered Agent

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