

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PO00000085146

Liquidation Outlet, Inc.

000003385150--2

-09/07/00--01025--024

*****78.75 *****78.75

<input checked="" type="checkbox"/>	Art of Inc. File	<u>Cert</u>
<input type="checkbox"/>	LTD Partnership File	
<input type="checkbox"/>	Foreign Corp. File	
<input type="checkbox"/>	L.C. File	
<input type="checkbox"/>	Fictitious Name File	
<input type="checkbox"/>	Trade/Service Mark	
<input type="checkbox"/>	Merger File	
<input type="checkbox"/>	Art. of Amend. File	
<input type="checkbox"/>	RA Resignation	
<input type="checkbox"/>	Dissolution / Withdrawal	
<input type="checkbox"/>	Annual Report / Reinstatement	
<input checked="" type="checkbox"/>	Cert. Copy	
<input type="checkbox"/>	Photo Copy	
<input type="checkbox"/>	Certificate of Good Standing	
<input type="checkbox"/>	Certificate of Status	
<input type="checkbox"/>	Certificate of Fictitious Name	
<input type="checkbox"/>	Corp Record Search	
<input type="checkbox"/>	Officer Search	
<input type="checkbox"/>	Fictitious Search	
<input type="checkbox"/>	Fictitious Owner Search	
<input type="checkbox"/>	Vehicle Search	
<input type="checkbox"/>	Driving Record	
<input type="checkbox"/>	UCC 1 or 3 File	
<input type="checkbox"/>	UCC 11 Search	
<input type="checkbox"/>	UCC 11 Retrieval	
<input type="checkbox"/>	Courier	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 SEP - 8 PM 3:29

RECEIVED
00 SEP - 7 AM 11:00

2544
W000-21971

Signature _____

Requested by: CO

Name _____

Date 9/7/00

Time 11:00

Walk-In _____

Will Pick Up _____

9/8/00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP -8 PM 3:29

September 7, 2000

CAPITAL CONNECTION, INC.
417 E. VIRGINIA STREET #1
TALLAHASSEE, FL 32302

SUBJECT: LIQUIDATION OUTLET, INC.
Ref. Number: W00000021971

We have received your document for LIQUIDATION OUTLET, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 800A00047472

RECEIVED

00 SEP -8 PM 1:58

STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Corrected

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Liquidation Outlet Sales, Inc.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP -9 PM 3:29

ARTICLE II PRINCIPAL OFFICE

The principal place of business / mailing address is:

428 N.W. 35th Street, Boca Raton, Florida 33429

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell liquidated material.

ARTICLE IV SHARES

The number of shares of stock is:

500 shares

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s) and address(es):

**Shawn Maesel - President
428 N.W. 35th Street, Boca Raton, Florida 33429**

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

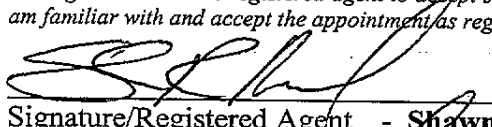
**Shawn Maesel
428 N.W. 35th Street, Boca Raton, Florida 33429**

ARTICLE VII INCORPORATOR

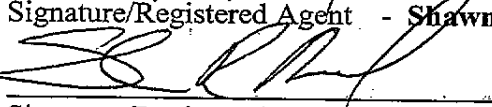
The name and address of the Incorporator is:

**Shawn Maesel
428 N.W. 35th Street, Boca Raton, Florida 33429**

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


Signature/Registered Agent - Shawn Maesel

9-6-00
Date


Signature/Registered Agent - Shawn Maesel

9-6-00
Date