POODOOOOOOOOO

FILED

00 OCT -2 PM 3: 02

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

TALLAHASSEE, FLORIDA

SUBJECT: AND ATTIC DISTRIBUTORS, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	check for:	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM	HECTOR DEL			
Name (Printed or typed) 15204 SW Aq ST Address				
	DAVIE, FC	3333 / State & Zip	-	
	954-447-66 Daytime Te	9 / elephone number		

HeCTON Dole DO GAVE

AUTHORIZATION BY PHONOTE: Please provide the original and one copy of the articles.

CORRECT PONCTUATION LANGUAGE

CONTROL OF NOTE: Please provide the original and one copy of the articles.

PH 10/4/00

- ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)			
ARTICLE I NAME	FILED		
The name of the comoration shall be:	00 OCT -2 PM 3: 02	-	
ANNS ATTIC DISTRIBUTORS, INC.	- SEUNETARY OF STATE TALLAHASSEE, FLORIDA		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P-0 Bo+ 260115	r, product the r initial initi	<u> </u>	
PEMBRICE PINES, FL 33026 ARTICLE III PURPOSE The purpose for which the corporation is organized is: PROFIL			
ARTICLE IV SHARES The number of shares of stock is: 10,000	· · · · · · · · · · · · · · · · · · ·		
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(cs): HECTOR DELEGY US204 SW 49 57	<u> </u>		
DAVIE, FL			
3 3 3 3 1			
ARTICLE VI REGISTERED AGENT			
The name and Florida street address of the registered agent is:			
HECTOR DELEON			
SAO4 SW 445T DAVIE, FL 3333/ ARTICLE VII INCORPORATOR			
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:			
HECTER DELECT 15204 SW 4951			
DA NE , FC 33331			
******************************	*********		
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	ed corporation at the place designated in this		
fleater the from	9-29-as		
Signature/Registered Agent	Date		
Weter The Zon	92000		
Signature/Incorporator	Date Date		