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

: FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 Phone : (305)716-0346 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

C. GRAPHICS INC.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION OF

C. GRAPHICS INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: c. GRAPHICS INC.

The principal place of business of this corporation shall be: 9949 N.W. 89th Ave, Medley F1 33178.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

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

100 shares @ \$1.00 par value.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer (s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Candido Alberto Vidal 1210 NW 26 Street Miami F1, 33142.

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

Candido Alberto Vidal 1210 NW 26 Street Miami Pl, 33142.

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 6th day of actober

Signature(s) of Incorporator(s)

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. 1	he	name	of	the	corp	orat	ion:
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CD'S PHYCE THO

		
2. The name and address of the registered agen office is:	t and	۸۱۵ ۱
CANDIDO ALBERTO VIDAL 9949 NW 89th Ave	0 007	ECRE ISION
(P.O. BOX NOT ACCEPTABLE)	5.	77.27.27.27.27.27.27.27.27.27.27.27.27.2
Medley, Fl 33178.	PM	220 C
(CITY/STATE/ZIP)	1:26	RATIONS

SIGNATURE

TITLE

DATE 10/6/00

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE 2.