(SAMPLE LETTER OF TRANSMITTAL)

DATE

10-23-00

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

Re: EAST COAST SUNSHING LABEL & SIGN PRINTING Inc. (Name of Corporation) Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

FILED

00 OCT 30 AN 8: 38

SECKETANY OF STATE

ALL AHASSIT. FLORID

(Individual's Name)

EAST COAST SUNShing LAREL & SIGN PRINTING, Inc. (Name of Corporation)

John John

MAILING ADDRESS OF CORPORATION —			
18631 NE 24 PL			
NORTH MIAMI BEACH, FL 33181	2		
(305) 932 - 8250 Area Code Number Ext.			

ARTICLES OF INCORPORATION

of

EAST COAST SURShine LABEL & SIGN PRINTING. Inc.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE	E I - CORPORATE NAME			
The name of the corporation is:				
EAST COAST SUNShine LABO	EL & SIGN PRINTING.	Incas e		
ARTI This corporation shall exist perpetually unless diss	ICLE II - DURATION	FILED OCT 30 AM 8: 38 CRETARY OF STATE LAHASSEL, FLORIDA		
The corporation is organized for the purpose of enumerical states and the State of Florida.	gaging in any activities or business pe	ermitted under the laws of the		
ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue				
The street address of the initial principal office and STREET ADDRESS	i, if different, the mailing address is:			
	, , , , , , , , , , , , , , , , , , ,			
CITY NORTH MIAMI BEACH	FLORIDA	ZIP 3318D		
Mailing address, if different STREET ADDRESS		775		
CITY	FLORIDA	ZIP		
ARTICLE VI - INITIAL	REGISTERED OFFICE AND AG	ENT		
The street address of the initial registered office and the name of the initial registered agent at the office is:				
NAME MICHAEL ELLISTA		-		
ADDRESS 18631 NE 24 PLACE				
CITY NORTH MIAMI BEACH	FLORIDA	ZIP 33180		

ARTICLE VII - IN	ITIAL BOARD OF DIRECTOR	<u></u>
This corporation shall haveONR_ either increased or diminished from time to time by the laddresses of the initial director(s) of the corporation are	By-Laws, but shall never he less th	The number of directors may be nan one (1). The names and
NAME MICHAEL ELLIOTT	•	Ar agr
ADDRESS 18631 NE 24 PLAC	.	
CITY NORTH MIAMI BEACH	STATE EL	ZIP 23. 20
NAME		ZIP 33180
ADDRESS	·	
CITY	STATE	ZIP
NAME		
ADDRESS	<u> </u>	: F#
CITY	STATE	ZIP
CITY NORTH MIAMI BEACH	STATE FL	ZIP 33,00
NAME	STATE FL	ZIP 33180
ADDRESS	-	
CITY	STATE	ZIP
NAME		. 211
ADDRESS	· · · · · · · · · · · · · · · · · · ·	
CITY	STATE	ZIP
he undersigned incorporator(s) have executed these	Articles of Incorporation this	23
ay of OCTOBER	, P <u>000</u>	
	Mi chall My	(Signature)
		(Signature)

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

OO OCT 30 AM 8: 38
SECRETARY OF STATE
TALLAHASSI E. FLORIDA

EAST COAST SUNSHINE LABEL & SIGN PRINTING, INE (name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 18631 NE 24 AUC	
North MIAMIBEACH, FL	33180
has named Michael Elliott	
located at the aforesaid address, as its registered agen	nt to accept service of process within this
state.	-

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

Michael Club 10-23-00
(Signature) (Date)