# P00000110244 MOYAL & ASSOCIATES, INC.

82 N. UNIVERSITY DRIVE PEMBROKE Pines, FL. 33024 TEL (954) 430-3930 FAX (954) 430-3939 EMAIL: PMOYAL@MSN.COM

### TRANSMITTAL LETTER

700003468677---7 -11/17/00--01056--012 \*\*\*\*\*\*78.75 \*\*\*\*\*\*79 75

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

SUBJECT: ABSOLUTE SHINE, INC

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

for:			\$131.25	a ale or a bridge
\$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	Filing Fee,	

FROM: HOLLY E. NICHOLSON

6921 PEMBROKE ROAD

PEMBROKE PINES, FLORIDA 33023

954-682-2439

NOTE: Please provides the original and one copy of the articles.

File: f:\CORPMAST

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## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 21, 2000

HOLLY E NICHOLSON 6921 PEMBROKE ROAD PEMBROKE PINES, FL 33023

SUBJECT: ABSOLUTE SHINE, INC. Ref. Number: W00000027643

Attn Patrick? Review and cau me A.S.A.P.

We have received your document for ABSOLUTE SHINE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

(954) 182-2439

#### 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) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 000A00059684

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## AN ABSOLUTE SHINE, INC

#### ARTICLE I - Name of corporation:

The name of this corporation is: AN ABSOLUTE SHINE, INC

#### **ARTICLE II - Duration:**

This corporation shall have perpetual existence commencing on the date of this filing of those Articles with the Department of State.

#### **ARTICLE III - Purpose:**

This corporation is organized for the purposed of transacting of any and all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes as same now exists or may hereafter be amended.

#### **ARTICLE IV - Capital Stock:**

This corporation is authorized to issue 600 shares of One-dollar par value common stock, which shall be designated as "Common Shares."

#### **ARTICLE V - Pre-emptive Rights:**

Every shareholder, upon the sale for cash of any new stock of this corporation, shall have the right to purchase his pro-rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

#### ARTICLE VI - Initial Registered Office and Agent:

The street and address of the initial registered office of this corporation is

#### 6921 PEMBROKE ROAD, PEMBROKE PINES FLORIDA 33023

And the name of the initial registered agent of this corporation upon whom service of process may be had is: HOLLY E. NICHOLSON.



#### **ARTICLE VII - Initial Board of Directors:**

This corporation shall have one Director constituting the initial Board of Director. The number of directors may be either increased or decreased from time to time by bylaws; however, there shall never be less than one Director nor more than five. The name and address of the initial Board of Directors of the corporation is:

#### HOLLY E. NICHOLSON 6921 PEMBROKE ROAD PEMBROKE PINES FLORIDA 33023

#### **ARTICLE VIII - Incorporators:**

The name and address of the Incorporator signing these Articles is:

#### HOLLY E. NICHOLSON 6921 PEMBROKE ROAD PEMBROKE PINES FLORIDA 33023

#### **ARTICLE IX - Indemnification:**

The corporation shall indemnify any Officer or Director or any former Officer or Director, to the full extent permitted by law.

#### **ARTICLE X - Amendment:**

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, by a majority vote of the Board of Directors, and any right conferred upon the shareholders is subject to this reservation.

#### ARTICLE XI - Principal Office & Mailing Address:

The principal Office & Mailing Address of the Corporation is:

6921 PEMBROKE ROAD PEMBROKE PINES, FLORIDA 33023 IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation on:

HOLLY E. NICHOLSON

Incorporator

STATE OF FLORIDA }
SS
COUNTY OF BROWARD }

**BEFORE ME**, an officer duly authorized to administer oaths and take acknowledgments, personally appeared who is personally known to me, and known to be and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this day November 14, 2000

OXARY PUBEIO
State of Florida

My Commission Expires:

# NOV 27 DM

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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. The name of the corporation is: ABSOLUTE SHINE, INC
- 2. The name and address of the registered agent and office is:

#### HOLLY E. NICHOLSON

(Name)

#### 6921 PEMBROKE ROAD

(P.O. Box or Mail Drop Box NOT Acceptable)

#### PEMBROKE PINES, FLORIDA 33023

(City/State/Zip)

Having been named as a 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.

November 14, 2000

(Date)