Pa1000009939

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

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SUBJECT: Joe Lamberto, Inc.

Telephone Number

I enclose an original and 1 copy of the Articles of Incorporation for the above corporation and a check in the amount of $\frac{1}{2}$.

SIGNED: DOPO CAULIDA

From:

JOSEPH J LAMBERD III

Name

96 Allworthy ST

Address

PORT Charlotte, Pl 33954

City State Zip

941-624-5853

HILED

JAN 25 AMII: 52

BECRETARY OF STATE

ARTICLES OF INCORPORATION OF Joe Lamberto, Inc.

OJANS MAILES

ARTICLE I NAME

The name of the corporation shall be: Joe Lamberto, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 96 Allworthy St, Port Charlotte, FL 33948

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is: Joe Lamberto 96 Allworthy St Port Charlotte, FL 33948

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Joe Lamberto
96 Allworthy St
Port Charlotte, FL 33948

The undersigned has executed these Articles of Incorporation this 22 day of 54 2001

,Incorporator

CERTIFICATE OF DESIGNATION

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: Joe Lamberto, Inc.
- 2. The name and address of the registered agent and office is:

Joe Lamberto 96 Allworthy St Port Charlotte, FL 33948

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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.

Signature: Joep Janhto IF

Date: 1/22/01