# Polocoo 19855

DATE February 19, 2001 FEB 22 AM 8: 35

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Re:	Surface	Art	Studio,	Inc.		. 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.

500003748135-002 -02/22/01-01171-002 \*\*\*\*\*78.75 \*\*\*\*\*78.75 Amuleun (1) cank Kennedy (Individual's Name)

Surface Art Studio, Inc.
(Name of Corporation)

MAILING ADDRESS OF CORPORATION

Surface Art Studio, Inc.

223 South Palmway # 1

Lake Worth, FL 33460

PHONE

(561) 547-5237

Area Code Number Ext.

### ARTICLES OF INCORPORATION

FILED

of

OI FEB 22 AM 8: 35

Surface Art Studio, Inc.
(name of corporation)

<u>SECRETARY DE STATE</u> ALLAHASSEE, FLORIDA

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 I - CORPORATE NAME

The name of the corporation is:

Surface Art Studio, Inc.

#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

#### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

#### ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

CITY	Lake Worth	FLORIDA	ZIP 33460
Mailing	address, if different		
STREET ADD	PRESS		
	Same As Above		
CITY	-	- FLORIDA	ZIP

#### ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Victoria Kennedy		
ADDRESS	223 South Palmway # 1		
CITY	Lake Worth	FLORIDA	ZIP 33460

OTDEET ADDRESS

This corp	ARTICL.	E <sub>.</sub> VII - INITIAL B			umber of directors	may be
either increase	d or diminished from time to tine initial director(s) of the corpo	me by the By-Laws	but shall	never be less than or	ne (1). The names	and
NAME	Frank Kennedy					
ADDRESS	223 South Palmy	way # 1		-		
CITY	Lake Worth		STATE	Florida	ZIP 3346	50
NAME						
ADDRESS	-					
CITY	<u>-</u>		STATE		ZIP	
NAME						
ADDRESS					-	
CITY			STATE		ZIP	
The names and	addresses of the incorporators  Frank Kennedy	RTICLE VIII - IN			ows:	···
ADDRESS	223 South Palmway	, # 1	-,,- <del>-</del> ,			
CITY	Lake Worth		STATE	Florida	ZIP 33460	)
NAME		·				
ADDRESS		<u>-</u> .				
CITY			STATE		ZIP	· <del></del>
NAME						
ADDRESS					·	·
CITY			STATE		ZIP	4.
The undersigr	ned incorporator(s) have exec		s of Inco	_	19th	
		<del></del> **	<u></u>	<u>.                                    </u>		

(Signature)

(Signature)

(Signature)

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Surface Art Studio, Inc.
(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 223 South Palmway # 1
Lake Worth, Florida 33460
has named Victoria Kennedy
located at the aforesaid address, as its registered agent to accept service of process within this
state.
223 South Palmway # 1
Lake Worth, FL 33460

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.

Victoria Kennedy
Victoria Kennedy

Victoria Kennedy

(Signature)

February 19, 2004-887

(Date)

FEB 22

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