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



SUBJECT:

_ KADES ENT., INC.

(Proposed corporate name - must include suffix)

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

\$ 70.00 [XX] \$ 78.75

1 \$ 122.50

\$131.25

 $\begin{bmatrix} 1 \end{bmatrix}$

Filing Fee

Filing Fee & Certificate Filing Fee & Certified Copy Filing Fee Certified Copy

& Certificate

FROM:

KRISTIN MAJEWSKI

Name (print or type)

1730 WINTERGREEN BLVD

Address

WINTER PARK, FL 32792

City, State & Zip

407-492-5980

Daytime Telephone number

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

KADES ENT., INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1259 MARINA POINT # 311 CASSELBERRY, FL 32707

ARTICLE III SHARES

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

6000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KHADER SUID
1259 MARINA POINT # 311
CASSELBERRY, FL 32707

ARTICLE V INCORPORATOR(S)

KHADER SUI	ח משפינה	tonia.		- —	
					-
1259 MARII	NA POINT #	311			
CASSELBER	RY, TFL 32	707	*	.=	
e undersigned inc	orporator(s) ha	s (have) executed t	hese Articles of	Incorporation th	nis
e undersigned inc	orporator(s) ha day of	s (have) executed t			nis
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		APRIL			nis
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		APRIL Signature			n is

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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:

KADES ENT., INC.

2. The name and address of the registered agent and office is:

KHADER (Name)

1259 MARINA POINT #311
(P.O. Box not acceptable)

CASSELBERRY, FL 32707 (City, State, Zip) OLAPR 30 AMIL: 3: SECRLIAN DESTAIL

Having been named as registered agent and to accept service of process fort he above stated corporation at the place designed 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)