## POLOGOOSS43

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

100004326431--5 -05/29/01--01155--012 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

(, , , , ,	· · · · · · · · · · · · · · · · · · ·	
	i one (1) copy of the articles of i	ncorporation and a check
for: \$70.00	\$78.75 Filing Fee & Certificate  \$ Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
₹^ .		· · · · · · · · · · · · · · · · · · ·
FROM:	Name (printed or typed)  1960/ N.E.	<del></del>
	1960/ M. B. /	ANSE O
•	NO. MIAM/ BC	H. FLA. 3 SS 72 7
	City, State & Zip	2079 SER 3 1
	954-618-	
	Daytime Telephone number	3: 20 TATE ORIDA

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



## ARTICLES OF INCORPORATION

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

ARTICLE I	NAME		
The name of the	corporation shall be:	<b>-</b>	
	A. D. Wholesale . Inc	OI MAY 29 PM 3: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA	71
ARTICLE II	PRINCIPAL OFFICE	29 TARY ASSE	
The principal place	ce of business and mailing address of this corporation shall be:		111
	1960/ N.E. 19th LOURT	ြို့တူ ယူ	
	DO. MI ANI BCH. FLA. 33179	i 20	
ARTICLE III	SHARES		
The number of sh	ares of stock that this corporation is authorized to have outstanding at any one t	time ic:	
	500	1111C 15.	
•			
ARTICLE IV	INITIAL REGISTERED AGENT AND STREET ADDRESS		
The name and Flo	orida street address of the initial registered agent are:		
	Marile Collin Maril		
	DANA SCHUMAN 1960/ NE. 19th COURT NO. MIAMI BCH. FCA. 33179 INCORPORATOR		
ARTICLE V	100. MIAMI BOH FOG. 33/19		
The name and ad			
The States Alle MA	Idress of the incorporator to these Articles of Incorporation are:		
$\sim$ $\wedge$	DANA SCHUMAN		
	19601 N.E. 1.9H COURT		
	NO. MISMI BUH. FLA. 33179	,	
$V_{\cdot}$	5/23	0/	
Signa	sture/incorporator Date	/	
	Date		

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Date

## 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:_	A.D. E.	whole	2 Sole		Tu.
						_
				TALI	9	-
2.	The name and address of the re-	gistered agent and	office is:	AHAS	MAY 29	卫
	DANA	SCHUMAN (Name)	<u>/</u>	SEE C	9 PH 3:	<u>m</u>
	19601	N.E /	9th 6	URT	3: 20	:
	(P.(	O. Box not acceptable	1)	P		
	NO. MIL	m/ BcH. 1	ECA: 3	3179		
		(Citý/State/Lip)		<u></u>		
	· · · · · · · · · · · · · · · · · · ·					•
t t t	Having been named as registered above stated corporation at the plane appointment as registered age to comply with the provisions of all marice of my duties, and I am familias registered agent.	agent and to acceptace designated in the stand agree to actilist statutes relating to lar with and accept	nt service of his certification this cap to the proper the obligat	f process fo te, I hereby acity. I furth r and compl tions of my	r the accep er agi lete pe positio	ot ree erfor- on
				<b>4</b>	•	<u> </u>
	(Signature)			···		_