Florida Department of State Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

RIMZ AND ACCESSORIES INC.

Certificate of Status	0
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Electronic Filing Menu

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ARTICLES OF INCORPORATION OF

RIMZ AND ACCESSORIES INC.

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

ARTICLE I NAME

The name of the corporation shall be:

RIMZ AND ACCESSORIES INC
The principal place of business of this corporation shall
be: 4421 MADISON STREET, HOLLYWOOD FL 33021

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation. RIMZ AND ACCESORY SALES

ARTICLE III CAPITAL STOCK

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

1000 par value \$20.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

NAYAN K. LESLIE 4421 MADISON STREET HOLLYWOOD FL 33021

O1 JUN -6 AM ID: 56
SECREIANY OF STATE

ARTICLE VI INCORPORATORISI

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

NayAN K. Leslie
4421 MADISON Street
16014 wood, Fl. 33021

in WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 30 the day of May 2001

Signature(s) of Incorporator(s)

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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.

and the second of the second o
1. The name of the corporation:
RIMZ AND ARCESSORIES, INC.
2. The name and address of the registered agent and office is:
NAYAN K. Leslie
(P.O. BOX NOT ACCEPTABLE)
4421 MADISON, STREET HOTLING A. 33021
-+G+T-Y+STATE+Z P)
TALE O
SIGNATURE SE T
TITLE CONDO S TO BEE ST
DATE SOD
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE CERTIFICATE, I HEREBY AGREET TO ACT THE PLACE DESIGNATED IN THIS
FURTHER AGREE TO COMPLY WITH THIS CAPACITY, AND
DUTIES, AND I ACCEPT THE DUTIES
107.325, FLORIDA STATUTES.
SIGNATURE
DATE S/SDO