

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

| SUBJECT: _SHA | ELYN'S | INTERIC | ORS INC | ٤. |
|-------------------------------|---------------------|---|-------------------|--|
| {P | roposed corporate | name - must include : | | |
| | | | 0000: ** | 045074705 7/30/0101110009 ****78.75 *****78.75 |
| Enclosed is an original for : | and one (1) cop | by of the articles o | f incorporation | and a check |
| \$70.00 | \$78.7 5 | \$122.50 | = \$131.25 | |
| FROM: | Name | AES Clarke (printed or typed) DO Virsinin Address Planco FL. City, State & Zip | 32803 | |

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

Daytime Telephone number

01 JUL 30 PM 4: 04

ARTICLES OF INCORPORATION SECRETARY OF STATE TALLAHASSEE, FLORIDA

OF

The undersigned incorporator(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:

SHAELYN'S INTERIORS Inc.

ARTICLE II PRINCIPAL OFFICE

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

500 VIRSINIA DR. OR 12000, FC. 32803

ARTICLE III SHARES

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 STREET ADDRESS

The name and address of the initial registered agent is:

JAMES CLARKE 500 VIASINIA DA. OR LANDO, FL. 32803

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JAMES CLARKE 500 VIRSINIA OR. ORLANDO, FL. 32803

| The undersigned in | ncorporator(s) has(have) execu | rted these Articles of Incorporation this |
|--------------------|--------------------------------|---|
| 16** | day of _JUNE | <u> ७ २००।</u> . |
| | James M. Signature | anke |
| | Signature | |
| | Signature | |

Articles of Incorporation Filing Fee - \$35

FILED

CERTIFICATE OF DESIGNATION OF JUL 30 PM 4: 04 REGISTERED AGENT/REGISTERED OF FLORIDA

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: SHAELYN'S INTERIORS Inc |
|----|---|
| | <u></u> |
| 2. | The name and address of the registered agent and office is: |
| | JAMES CLANKE (Name) |
| | 500 Vilsinia Ok. (P.O. Box not acceptable) |
| | DRIANDO, FC. 32803 (City/State/Zip) |

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.