POLONAL LETTER STATES

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

Tallahassee, FL 32	2314					
SUBJECT: Christmas Trees Wahimited INC (Proposed corporate name - must include suffix)						
			****	4558 27/010 **70.00	01111010	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fe Certified & Certified Status	e, Copy cate of		
			T REQUIE	KED		
FROM: MARIAN HAZ OWRI Name (Printed or typed) ARE SOLUTION Name (Printed or typed)						
4115 MARQUETTE AVE SER 27 =						
Address FOR PHID City, State & Zin Address FOR PHID City, State & Zin						

10 AUG 2 8 2001

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: Christmas Trees Unkimited S.E. IN	J
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
411-MARQUETTE AVE	
Jackronvivre FramID	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
FILE 627 PM ASSEE, F	
The name and Florida street address of the initial registered agent are:	
NM HAZOWEI HIS Marquette Aue ARTICLE V INCORPORATOR	
ARTICLE V INCORPORATOR	
The name and address of the incorporator to these Articles of Incorporation are: NM Hazowr HIS MARRHETTE AVE JECK 10 KVI WE FV 3 22 10	
MM Hey luc 8/3/200/ Signature/Incorporator Opera	
Signature/Autor por ator / 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
ooligations of my position as registered agent	
In m Haz our	8/13/201
	8/√3/√h01

Signature/Registered Agent