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

700004565737 -08/31/01--01044

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

\$122.50

Filing Fee & Certified Copy \$131.25

Filing Fee, **Certified Copy**

& Certificate

ADDITIONAL COPY REQUIRED

954-224-8094 Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 5, 2001

BRIAN SCHREIBER 130 FOX RD HOLLYWOOD, FL 33024

SUBJECT: SCHREIBER ASSOCIATES, INC.

Ref. Number: W01000020603

We have received your document for SCHREIBER ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filings Section

Letter Number: 901A00050081

ARTICLES OF INCORPORATION

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:

Schreiber American Inc

ARTICLE II PRINCIPAL OFFICE

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

130 FOX RD HOllywood PL 33024 O1 SEP 14 PM 3: 40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

Brian Schreiber

130F0x RD H0//ywooD FG 33024

INCORPORATOR(S) ARTICLE V

See instructions for officers/directors

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

Brian Schweiber 130 Kox RD

HO11YWOOD FC 33024

Maria Schreiber 130 Fox RD.
Hollywood FL 33024

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12 day of September, 19 01

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

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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_	Schreiber Americ	can Inc
130 F	istered agent and office is: \[\sum_{\text{SUP}} \int \text{Condition} \] \[\sum_{\text{NAME}} \int \text{RD} \] \[\text{D} \text{Box or Mail Drop Box NOT ACCEPTABLE} \] \[\text{NOD FL 33024} \] \[\text{(CITY/STATE/ZIP)} \]	FILED 01 SEP 14 PM 3: 41 SECRETARY OF STATE TALLAHASSEE FLORID

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)

- / ユ - ð / (DATE)