

# P01000105852

## TRANSMITTAL LETTER

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

SUBJECT Unique Creations, Inc.  
PROPOSED CORPORATE NAME

200004661492--9  
-10/31/01--01040--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one ( 1 ) copy of the articles of incorporation  
and a check for : \$78.75

**XXXXX** Filing Fee & Certificate of Status **\$78.75**

FROM: MR. JOEL SCHWEFEL  
NAME ( PRINTED/ TYPED

5369 OAKMONT VILLAGE CIRCLE  
STREET ADDRESS

LAKE WORTH, FL. 33463  
CITY/STATE, AND ZIP CODE

561-227-0604  
DAYTIME TELEPHONE NUMBER

FILED  
01 OCT 31 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

D. WHITE NOV - 2 2001 2

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and / or Chapter 621, F.S. ( Profit )

**ARTICLE ONE NAME OF NEW ENTITY**

The name of the corporation shall be:  
**Unique Creations, Inc.**

**ARTICLE TWO PRINCIPLE OFFICE**

The principal place of business / mailing address is:  
**2750 N.E. 5Th Avenue  
Boca Raton, Fl. 33431**

**ARTICLE THREE PURPOSE**

The purpose for which the corporation is organized is:  
**For Profit Manufacturing/Distribution**

**ARTICLE FOUR SHARES**

The number of shares of stock is:  
**750 Shares**

**ARTICLE FIVE INITIAL OFFICERS / DIRECTORS**

The name( s ) and address( es ) :

A) Eugene Anthony Pellillo	B) Raymond Shuler	C) Douglas Coester
2750 N.E. 5Th Avenue	3450 Banks Road	1817 N.E. 50Th Street
Boca Raton, Fl. 33431	Margate, Fl. 33063	Pompano Beach, Fl. 33064

**ARTICLE SIX REGISTERED AGENT**

The name and and Florida street address of the registered agent is:

Mr. Joel Schwefel  
5369 Oakmont Village Circle  
Lake Worth, Fl. 33463

**ARTICLE SEVEN INCORPORATOR**

The name and address of the Incorporator is:

Mr. Joel Schwefel  
5369 Oakmont Village Circle  
Lake Worth , Fl. 33463

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certification, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

10/27/01

Signature/Incorporator

Date

10/27/01

**FILED**

**01 OCT 31 AM 8:01**

**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**