Requester's Name  Address	2001838C
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co Wintersprings, FC.	Office Use Only  MBER(S), (if known):
1(Corporation Name)	900047243192 -12/13/0101033021 (Document#) ******91.00 *****87.50
-2. (Corporation Name)	(Document #)
3 (Corporation Name)	(Document #)
4. (Corporation Name)  Walk in Pick up time	(Document #)  Certified Copy
Mail out Will wait	Photocopy
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment  Resignation of R.A., Officer/Director  Change of Registered Agent  Dissolution/Withdrawal  Merger  REGISTRATION/OHALIEICATION
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
CR2E031(7/97)	Examiner's Initials 2001

# DI-01-02

# ARTICLES of INCORPORATION OF MASTER'S CUT, INC.

FILED

01 DEC 13 AM 10: 51

SECRETARY OF STATE
TALL AHASSEE FLORIDA

The undersigned subscribers to these Articles of Incorporation natural persons competent to contract, hereby subscribes to and forms a Corporation for profit under the laws of the State of Florida.

#### ARTICLE 1 NAME

The name of the corporation is:

MASTER'S CUT, INC

#### ARTICLE 2 NATURE of BUSINESS

The Corporation may engage in any activity or business permitted under the Laws of the United States and the State of Florida.

## ARTICLE 3 CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any time is 1000 shares of Common stock, having the par value of Five (\$ 5.00) Dollars

### ARTICLE 4 INTIAL CAPITAL

The amount of capital with which this Corporation shall begin business is Five Thousand Dollars (\$5,000)

## ARTICLE 5 TERM OF EXISTENCE

This Corporation shall have perpetual existence.

#### **ARTICLE 6 ADDRESS**

The principal office of this Corporation shall be and is located at 1188 Willingham RD.OVIEDO, FL. 32766. The Board of directors may from time to time designate such other address and place of the principal office of the Corporation as it may see fit.

#### ARTICLE 7 DIRECTORS

The Corporation shall have two (2) directors initially, but may be increased from time to time by the Board of Directors.

The directors names and address are listed as well.

NAME

MARK FEDERICI

752 NIGHT OWL COURT WINTER SPRINGS, FL. 32708

TIMOTHY G. MCCLOSKEY

1188 WILLINGHAM RD. OVIEDO, FL. 32766

#### **ARTICLE 8 SUBSCRIBERS**

The subscribers to these Articles of Incorporation are the persons named above to serve as a Board of Director of the Corporation.

The names such subscribers and their respective addresses are more particularly set forth in Article 7 above.

# ARTICLE 9 EFFECTIVE DATE

These Articles of Incorporation shall be effective upon their having been properly filed with and accepted by the Secretary of State of Florida. January 1st 2002.

IN WITNESS WHEREOF. We have hereunto set forth my hand and seal acknowledged and filed the foregoing Articles of Incorporation under the laws of the State of Florida, This-----day of DECEMBER 2001

MARK EEDERICI/PRESIDENT

TIMOTHY G. MCCLOSKY/VICE-PRESIDENT

STATE OF FLORIDA COUNTY OF SEMINOLE

Before me personally appeared MARK FEDERICI, and TIMOTHY G. MCCLOSKY who are well known to me, and known to me to be the individuals described in and who executed the foregoing Articles of Incorporation and acknowledged before me that they executed the same for the purpose herein express.

Witness my hand and official seal in the County and State named above this----day of DECEMBER 2001

MY COMMISSION EXPIRES:

Sue Howard

\* My Commission CC972178

Notary Public State of Florida

CERTIFICATE OF DESIGNATION

O1 DEC 13 AM 10: 51

SECRETARY OF STATE
REGISTERED AGENT/REGISTERED OFFICE LAHASSEE FLORIDA

Persuant to the provisions of sections 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.

1. The name of the Corporation is:

MASTER'S CUT, INC.

2. The name of the registered agent:

MARK FEDERICI

3 The registered address is:

1188 WILLINGHAM RD. OVIEDO, FL. 32766

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 POSTION AS REGISTERED AGENT.

MARK FEDERICI

DATE -