

TRANSMITTAL LETTER

P02000016314

FILED
02 FEB -8 AM 9:34
DEPT. OF STATE
TALLAHASSEE, FLORIDA

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

600004896056--5
-02/08/02--01031--002
*****78.75 *****78.75

Subject: Cold Storage Applications, Inc.
(Proposed corporate name - must include suffix)

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

() \$35.00 () \$ 43.75 () \$70.00 (X) \$78.75

From:

Mr. Giovanni DeRemigis II

Name

1319 St. Tropez Circle, #1203

Address

Weston, FL 33326

City, State & Zip

(305) 970-7552

Daytime Telephone number

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

DB 2/13

ARTICLES OF INCORPORATION

FILED
02 FEB -8 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Cold Storage Applications, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1319 St. Tropez Circle, #1203
Weston, FL 33326

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares of common

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mr. Giovanni DeRemigis II
1319 St. Tropez Circle, #1203
Weston, FL 33326

ARTICLE V INCORPORATOR(S)

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

Mr. Giovanni DeRemigis II
1319 St. Tropez Circle, #1203
Weston, FL 33326

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

Twenty Eighth (28th) day of January, 2002.


signature

signature

signature

Article of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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:

Cold Storage Applications, Inc.

2. The name and address of the registered agent and office is:

Mr. Giovanni DeRemigis II

(Name)

1319 St. Tropez Circle, #1203

(P.O. Box not acceptable)

Weston, FL 33326

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above state 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.

x *Giovanni DeRemigis II*
(Signature)

02 FEB - 8 AM 9:34
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA