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Florida Department of State TALLAHASSEE, FLORIDA Division of Company

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : HUBCO

Account Number : 104662003400 ... Phone : (516) 935-3940 Fax Number : (516)935-3088

FLORIDA PROFIT CORPORATION OR P.A.

13 Black Incorporated

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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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:

13 Black Incorporated

ARTICLE II PRINCIPAL OFFICE

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

13 Black Incorporated

1259 Semoran Casselberry, FL 32707

ARTICLE III SHARES

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

1500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Andrew Reese 2000 North Semoran Orlando, FL 32807

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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ARTICLES V INCORPORATOR(S)

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

Andrew Reese 2000 North Semoran John Artz 1259 Semoran

Orlando, FL 32807

Casselberry, FL 32707

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

_day of <u>January</u>

Andrew Reese - Signature

01/03/2003 18:17 5169353088

SIGNATURE

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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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	13 Black Incorporated		
~			
2. The name and address of the register	ed agent and office is:		
•	Andrew Reese		•
	Name	r= .	
	2000 North Semoran		
	(P.O. Box or Mail Drop Box NOT Acceptable)	···	
	Orlando, FL 32807		
	(City / State / Zip)	• • • • • • • • • • • • • • • • • • • •	7 -
agent and agree to act in this capacit	n this certificate, I hereby accept the appointment as regis ly. I further agree to comply with the provisions of all the s performance of my duties, and am familiar with and accepted agent.	statutes	
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Mullim Hell	January 3rd, 2003	ŚĒ.	
Andrew Reese	(Date)	- ,	+ + + 1