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SECRETARY OF STATE
TALLAHASSEF FIRBULA

TRANSMITTAL LETTER

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, Florida 32314

Subject: Unique Artifacts, Inc.

(proposed corporate name-must include suffix)

		\$78.75	S87. 50	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	

ADDITIONAL COPY REQUIRED

FROM: Melba DeLynn Trehern.
Name (please print or type)

1444 First Street
Address

Sarasota, Florida 34236

(941) 918-4830 Daytime Telephone Number

Note: Please provide the original and one copy of the articles

ARTICLES OF INCORPORATION

SECRETARS OF FLORE 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:

Unique Artifacts, Inc.

ARTICLE II: PRINCIPAL OFFICE

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

> 1444 First Street Sarasota, Florida 34236

ARTICLE III: SHARES

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

1000 shares common stock @ \$1.00 per share

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Melba DeLynn Trehern 1444 First Street Sarasota, Florida 34236

ARTICLE V INCORPORATE(S)

See instructions for officers/directors

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

Melba DeLynn Trehern 1444 First Street Sarasota, Florida 34236

The undersigned incorporator (s) has (have) executed these Articles of Incorporation this: 25th. Day of October, 2002.

An additional articles	le must be added if an effective date is reque	ested.
Signature		
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:

Unique Artifacts, Inc.

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

Melba DeLynn Trehern

Name

1444 First Street

(P.O. Box or Mail Drop Box NOT Acceptable)

Sarasota, Florida 34236

City/ State/ Zip

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 position as registered agent.

Signature

Date

DEPARTMENT OF STATE DIVISION OF CORPORATIONS CORPORATE FILINGS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314