

## Florida Department of State

Division of Corporations
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Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

### FLORIDA PROFIT CORPORATION OR P.

ANDREA KORN ASSOCIATES, INC.

Certificate of Status	0
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1 SMITH MAR 19 2003

# ARTICLES OF INCORPORATION OF

Andrea Korn Associates, Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: Andrea Korn Associates, Inc.

The principal place of business of this corporation shall be: 13000 B.W. 100 Stacet. Liami, Fl 33186.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1,000

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Andrea Korn 13020 5W: 106 Street Miami, FLA 33186

#### ARTICLE VI INCORPORATORISI

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

JOSEPH L. FISHER, COA.
9449 S. OLD DIXIE HWY.
MIANN, FL 33156

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 18 day of March :2003

Signature(s) of Incorporator(s)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:		
Andrea Korn Associates, Inc	, , , , , , , , , , , , , , , , , , , ,	
Andrea Korn Associates, Inc.  2. The name and address of the registered agent an office is:  Taseet L. Fraker, COA	d Stri	·⁄= ≻'
(P.O. BOX NOT ACCEPTABLE)		
MIAMI, PZ 3315 5		<i>-</i>
(CITY/STATE/ZIP)	SECRETOR	
SIGNATURE		
TITLE CA	9:16	-
3-18-03 DATE		~
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY	IN THIS	_

FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION

407.325, FLORIDA STATUTES.