Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305) 634-3694

Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

waterbury corporation

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ARTICLES OF INCORPORATION

Waterbury Corporation

These Articles are in compliance with Chapter 607, F.S.

Article I

The name of this corporation shall be:

Waterbury Corporation

Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Plorida, and shall have perpetual existence.

Article III

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

360 Greco Avenue, Coral Gables, FL 35146

Article IV

The general nature of business of this corporation is to transact any and all lawful business.

Article V

The number of shares which this corporation shall have authority to issue is /00 shares, having an individual par value of \$ /.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

Article VI

The name and street address of the initial Registered Agent of this corporation shall be:

Ralph DeFronzo 360 Greco Avenue Coral Lables, FL 33146

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Article VII

The initial board of Directors shall consist of a total of person(s) and the name and address of the person(s) who are to serve as an initial director(s)

1 Person -> Zaloh DeFronzo 360 breco Avenue Coral Gables, Fl 33146

Article VIII

The name and address of the incorporator executing these Articles of Incorporation is:

Raph De Fronzo 360 Greco Avenue

Coral Gables, FL 33/46
The undersigned has executed these Articles of Incorporation this 1 day of 2003

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GERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.

REGISTERED AGENT

03 NOV -5 AM 8: 00
SECRETARY OF STATE
TALL AHASSEF FLORIDA

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