Division of Corporation 103000143931

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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.

BUTTERFLY DAYS, INC.

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 26, 2003

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SUBJECT: BUTTERFLY DAYS, INC.

REF: W03000035579

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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ARTICLES OF INCOMPORATION

TALLAHASSEF, FLORIDA

OF

BUTTERFLY DAYS, INC.

ARTICLE I

The name of the corporation shall be:

Butterfly Days, Inc.

ARTICLE II PRINCIPAL PLACE OF FUSIMEDS

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

13145 Spring Lake Drive Cooper City, FI 33330

ARTICLE III DURATION

This Corporation shall have perpetual existence commencing on the date of the filing of these Articles of Incorporation with the Department of State of Florida.

ARTICLE IV FURFOSE (S)

This Corporation is organized for the purposes of transacting any and all lawful business.

ARTICLE V CAPITAL STOIK

This Corporation is authorized to issue 1,000 shares of \$1.00 par value common stock

ARTICLE VI QUORUM FOR STOCKHOLDFRS MEETINGS

Unless otherwise provided for in the Copporation's Bylaws, a

PREDAKED BY: Tim A. Skalm, F.A. 22% Glades Roud 1256 Week More PL 1942) (751 262-259) Dac no. 256812

majority of the shares entitled to vote, represented in person or by proxy, shall be require to constitute a quorum at a meeting of shareholders.

ARTICLE VII LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in section 517, Florida statutes, unless limited as follows:

No limitations

ARTICLE VI.II

The name and street address of the initial registered agent is:

Cheri Harris 13145 Spring Lake Drive Cooper City, FI 33330

ARTICLE IX INCORPORATORS

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

Cheri Harris 13145 Spring Lake Drive Cooper City, FI 33330

ARTICLE X INITIAL BOARD OF DIFFECTORS

This Corporation shall have one director initially. The number of directors may be either increased or diminished from time to time in the manner provided in the Bylaws, but shall never be less than One. The name and address of the initial Director of the corporation is as follows:

Cheri Harris 13145 Spring Lake Drive Cooper City, FL 33330

ARTICLE XI INDEMNIFICATION

The Corporation shall indemnify its officers, directors and authorized agents for all liabilities incurred directly, indirectly or incidentally to services performed for the Corporation, to the fullest extent permitted under Florida law existing row or hereinafter enacted.

ARTICLE XII LIMITATIONS ON SHAREHOLDERS SULTS

Shareholders shall not have a cause of action against the Company's officers, Directors or agents as a result of any action taken, or as a result of their failure to take any action, unless deprivation of such right is deemed a nullity because, in the specific case, deprivation of a right of action would be impermissible in conflict with the public policy of the State of Florida. The fact that this Article shall be inapplicable in certain circumstances and the Courts of the State of Florida are hereby granted the specific authority to restructure this Article, on a case by case basis or generally, as required to most fully give legal effect to its intent.

The undersigned incorporator(s) has(have) executed these articles of incorporation this_11 day of November, 2003.

Signature(s) of the incorporator(s)	
Dentlon	Cheri Marris
	Typed Name of Incorporator
	Typed Name of Incorporator

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501. Florida Statutes, the undersigned corporation, organized under the Laws of the State of

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Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation: Butterfly Days, Inc.
- 2. The name and address of the registered agent and office is:

Cheri Harris 13145 Spring Lake Drive Cooper City, FL 33330

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 PROFER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

STGNATURE:

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