P04000121378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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08/23/04--01021--006 **35.00

08/23/04--01021--007 **35.00

04 AUG 23 AM 10:33
DIVISION OF CORPORATION

04 AUG 23 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATE ACCESS, INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) -- (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 8/23

___CERTIFIED COPY ___ ___CUS ___

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1.) Cabana Stripe, Inc.
(CORPORATE NAME & DOCUMENT #)

2.) ___
(CORPORATE NAME & DOCUMENT #)

3.) ___
(CORPORATE NAME & DOCUMENT #)

4.) ___
(CORPORATE NAME & DOCUMENT #)

5.) ___
(CORPORATE NAME & DOCUMENT #)

FILED
04 AUG 23 AM 10:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS ___

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Cabana Stripe, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

PMB 78
1007 North Federal Highway
Fort Lauderdale, FL 33304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

payroll services

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Michael Strouse, President
155 - 5th Avenue South, Suite 500
Minneapolis, MN 55401

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

NRAI Services, Inc.
526 East Park Avenue
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Michael Strouse
155 - 5th Avenue South, Suite 500
Minneapolis, MN 55401

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Sue Brodtmann — 8-18-04

Signature/Registered Agent Sue Brodtmann, Asst. Secretary Date

8/17/04

Signature/Incorporator Date

Michael Strouse