

# POS000040238

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Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**Fauxtopia Finishes, Inc.**

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ARTICLES OF INCORPORATION

*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:

**Fauxtopia Finishes, Inc.**

ARTICLE II PRINCIPAL OFFICE

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

**Fauxtopia Finishes, Inc.**

**2217 43rd Lane S.W.**

**Naples, FL 34116**

ARTICLE III SHARES

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

**10 Shares at No Par Value**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Christina McCord**

**2217 43rd Lane S.W.**

**Naples, FL 34116**

*Prepared By:*

Bruce B. Hubbard

77 East John St.

Hicksville, New York 11801

1-516-935-3940

**ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)**

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

**Christina McCord - President  
2217 43rd Lane S.W.  
Naples, FL 34116**

**ARTICLES VI INCORPORATOR(S)**

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

**Christina McCord  
2217 43rd Lane S.W.  
Naples, FL 34116**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

11th day of March 2005.

  
**Christina McCord - Signature**

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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Fauxtopia Finishes, Inc.**

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

**Christina McCord**

Name


**2217 43rd Lane S.W.**

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

**Naples, FL 34116**

(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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

  
**Christina McCord**  
SIGNATURE

**March 11, 2005**

(Date)