00467941 Florida Department of State

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FLORIDA PROFIT CORPORATION OR P.A.

S. Kline Inc.

Certificate of Status	1
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3/29/2005

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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:

S. Kline Inc.

ARTICLE II PRINCIPAL OFFICE

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

S. Kline Inc. 289 B1 Pine Hov Circle Greenaures, FL 33463 SECRETARY OF STATE
TALLAMASSET FUNE OF STATE

ARTICLE III SHARES

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

1,000 Shares at \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Shirley Kline 209 B1 Pine Hov Circle Greenacres, FL 33463

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):

Shirley Kline - President 209 B1 Pine Hov Circle Greenacres, FL 33463

ARTICLES VI INCORPORATOR(S)

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

Shirley Kline 209 B1 Pine Hov Circle Greenacres, FL 33463

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

23rd day of March 2005.

Shirley Kline-Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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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: S. Kline Inc.			
2. The name and address of the registered agent and office	is:		
Sh	airley Kline		
	Name		
20	9 B1 Pine Hov Circle		
	x or Mail Drop Box NOT Acceptable)		
G	reenacres. FL 33463		
	(City / State / Zip)		
Having been named as registered agent and to accept s corporation at the place designated in this certificate, I agent and agree to act in this capacity. I further agree t relating to the proper and complete performance of my obligations of my position as registered agent.	hereby accept the appointment as registered to comply with the provisions of all the statut		
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		E	
Shirley Kling	March 23, 2005	ည်	
Shirley Kline SIGNATURE	(Date)	~	