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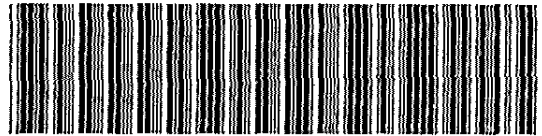
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/07/05--01022--021 **70.00

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05 APR 15 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/18/05
BWK

W05000013720

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Antares Corp.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: Simone Berger
Name (printed or typed)

17400 NE 12 Ct.
Address

No. Miami Beach, Fl. 33162
City, State & Zip

305-651-6176
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 16, 2005

SIMONE BERGER
17400 NE 12 COURT
N. MIAMI BEACH, FL 33162

SUBJECT: ANTARES CORP.
Ref. Number: W05000013720

We have received your document for ANTARES CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document number of the name conflict is 378038 ANTARES, INC..

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6840.

Bruce W Kitchens
Document Specialist
New Filings Section

Letter Number: 205A00018111

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05 MAR 15 PM 8 18

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ARTICLES OF INCORPORATION

05 APR 15 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Antares Designs Inc.

ARTICLE II PRINCIPAL OFFICE

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

17400 NE 12 Ct.

No. Miami Beach, Fl. 33162

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Allen P. Shappe

17400 NE 12 Ct.

No. Miami Beach, Fl. 33162

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Simone Berger

17400 NE 12 Ct.

No. Miami Beach, Fl. 33162

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

3 day of March, ~~19~~ 2005.



Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

1. The name of the corporation is: Antares Designs Inc

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

Allen P. Shappe

(NAME)

17400 NE 12 St.

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

No. Miami Beach, Fl. 33162

(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 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.

Allen P. Shappe
(SIGNATURE)

3/3/05
(DATE)