# D0500000545

Florida Department of State

Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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To:

Division of Corporations

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.

paga, inc.

Certificate of Status	r managamenta de la composição de la com
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

# HOSODD 17227 & RICLES OF INCORPORATION

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OF

SECRETARY OF STATE TALLAHASSEE FLORIDA

#### PAGA, INC.

The undersigned incorporation(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:

PAGA, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

9083 VINEYARD LAKE DRIVE PLANTATION, FL 33324

#### ARTICLE III CAPITAL STOCK

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

1,000 shares @ 1.00 par value

#### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

PAMELA KAUFMANN 9083 VINEYARD LAKE DRIVE PLANTATION, FL 33324

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#### ARTICLE V - INCORPORATOR (S)

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

PAMELA KAUFMANN 9083 VINEYARD LAKE DRIVE PLANTATION, FL 33324

#### ARTICLE VI AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

#### ARTICLE VII - BY LAWS

The power to adopt, alter, amend or repeal By-laws shall be vested in the Board of Directors and shareholders.

#### ARTICLE VII - BY LAWS

The undersigned h	as (have) executed these Articles of Incorporation this
	Signature/Title Chymdra president
	Signature/Title

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Signature/Title

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SECRETARY OF CLAFE
TALLAHASSEF FLORIDA

# CERTIFICATE OF DESIGNATION 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.

The name of the corporation is: PAGA, INC.

The name and address of the registered agent and office:
PAMELA KAUFMANN
9083 VINEYARD LAKE DRIVE
PLANTATION, FL 33324

SIGNATURE OFFICE OFFICE OFFICE PRESIDENT

DATE 2/15/95

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designed 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 provision 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.

SIGNATURE

DATE

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