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Division of Corporations

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Account Number : 072450003255 Phone : (305)634-3694

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FLORIDA PROFIT CORPORATION OR P.A.

s & g distributors, inc.

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ARTICLES OF INCORPORATION

OF

S & G DISTRIBUTORS, INC.

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be: S & G DISTRIBUTORS, INC.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation: P.O. BOX 772001, CORAL SPRINGS, FL 33077

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue is 100 shares of common stock, having an individual par value of \$ 1.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

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ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: SHAUNI FLORES, 9208 NW 18 STREET, CORAL SPRINGS, FL 33071

ARTICLE VII

The name and address of the officers and board of directors shall be:

PRESIDENT

SHAUNI FLORES

P.O. BOX 772001

CORAL SPRINGS, FL 33077

VICE PRESIDENT

GUILLERMO A. FLORES JR.

P.O. BOX 772001

CORAL SPRINGS, FL 33077

ARTICLE VIII

The name and address of the incorporator(s) to these Articles of Incorporation shall be: SHAUNI FLORES, P.O. BOX CORAL SPRINGS, FL 33077

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.

REGISTERED AGENT

FILED

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SECRETARY OF STATE
TALL A HASSEF, FLORIDA