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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)205-0381

From: Account Name : BLUMBERG/EXCELSTOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (212)431-5000  
Fax Number : (212)431-1441

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**ULTIMATE SPECTACLE OF FLORIDA, INC.**

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

ULTIMATE SPECTACLE OF FLORIDA, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

C/O COHEN FASHION OPTICAL, 100 QUENTIN ROOSEVELT BLVD., STE 508, GARDEN CITY, NY 11530

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

FOR ANY AND ALL LAWFUL PURPOSES FOR WHICH A CORPORATION MAY BE FORMED UNDER FLORIDA STATUE

**ARTICLE IV SHARES**

The number of shares of stock is:

200 COMMON

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

ROBERT COHEN, PRES. & DIRECTOR, C/O STERLING VISION, 100 QUENTIN ROOSEVELT BLVD., STE 508, GARDEN CITY, NY 11530

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC., 4435 OLD WINTER GARDEN RD., ORLANDO, FL 32811

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOSE MOJICA, C/O BLUMBERGEXCELSIOR, 62 WHITE ST., NY, NY 10013

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

\_\_\_\_\_  
Signature/Registered Agent JOSE MOJICA, ASST. SECY.

12/4/2006  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

12/4/2006  
\_\_\_\_\_  
Date

BlumbergExcelsior  
62 White Street  
New York, NY 10013

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