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SECRETARY OF STATE
TALLAHASSEE, FI ORIO

J. Shivers MAR 22 TEN

TRANSMITTAL LETTER

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

PS CRAFTSMANSHIP CORPORATION SUBJECT: Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for: **FEES:** Certificate of Domestication \$50.00 Articles of Incorporation and Certified Copy \$78.75 Total to domesticate and file \$128.75 **OPTIONAL:** Certificate of Status \$ 8.75 FROM: STEPHAN POUSSE Name (printed or typed) **4001 PARK AVENUE** Address **COCONUT GROVE, FL 33133** City, State & Zip 305 591 1330 Daytime Telephone Number

CERTIFICATE OF DOMESTICATION

The undersigned, STEPHAN POUSSE		PRESIDENT		
	(Name)	(Title)		
of	PS CRAFTSMANSHIP CORPORATION (Corporation Name)	a foreign corporation,		
	(T			
n a	accordance with s. 607.1801, Florida Statutes, does her	eby certify:		
•	The date on which corporation was first formed was _	DECEMBER 20	<u>1996</u> .	
2.	The jurisdiction where the above named corporation w	as first formed, incorporat	ed, or otherwise	
	came into being was	STATE OF NEW YORK	<u> </u>	
•	The name of the corporation immediately prior to the twas	•		
4.	The name of the corporation, as set forth in its articles			
	s. 607.0202 and 607.0401 with this certificate is			
	3. 007.0202 and 007.0401 with this certificate is			
	Attached are Florida articles of incorporation to compl to s. 607.1801.	ete the domestication requ	irements pursuant	
amPRESIDENT , of		PS CRAFTSMANSHIP CORPORATION		
nd	am authorized to sign this Certificate of Domestication	on behalf of the corporati	ion and have done	
	his the 15TH day of MARCH		2007	
	Mhun		SE SE	
	(Authorized Signa	ture)	CRE AH	
	ľ		MAR 20 CRETARY AHASSEE	
		•	720 AMIO TARY OF ST ASSEE, FLO	
	Filing Fee:			
	Certificate of Domestication	\$50.00	AM 10: 11 OF STATE E, FLORIDA	
	Articles of Incorporation and Certification			
	Total to domesticate and file	\$128.75		

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: PSCBATH CORPORATION

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: 1917 NORTHWEST 82ND AVENUE - MIAMI, FL 33126

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100 SHARES

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: STEPHAN POUSSE, 1917 NORTHWEST 82ND AVENUE - MIAMI, FL 33126, PRESIDENT

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED ACENTED ACCEPTABLE OF THE REGISTERED ACCEPTAB

ARTICLE VII INCORPORATOR

THE <u>NAME AND ADDRESS</u> OF THE INCORPORATOR IS: STEPHAN POUSSE, 1917 NORTHWEST 82ND AVENUE - MIAMI, FL 33126

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 AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature/Regis

Signature/Incorporator

eate

MARCH 15, 600 T

Date