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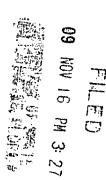
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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11-12-09

COVER LETTER

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

SUBJECT:	UBJECT: SIM CORP. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
□ \$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: _	SIM CORP. Name (Printed or typed)			
	19333 AUTUMN WOODS AVE.			
_	Address			
	TAMPA, FL 33647 City, State & Zip 813-417-3474 Daytime Telephone number			
_				
_				
	E-mail address: (to be used for future annual report notification)			
NOTE: Please provide the original and one copy of the articles.				
jejes z .	Nume	(prince or type)	** *** ***	

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:

SIM CORP.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 19333 AUTUMN WOODS AVE. TAMPA, FL 33647

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell and service aquarium products and to exercise all of the rights, powers and privileges now or hereafter conferred upon corporations organized under the laws of the State of Florida. The Corporation may hold, purchase, mortgage, lease and convey real, tangible and intangible property.

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Barry Thorne, President and Director 19333 Autumn Woods Ave. Tampa, FL Tonya Thorne Secretary and Director 19333 Autumn Woods Ave. Tampa, FL

ARTICLE VI REGISTERED AGENT

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

Barry Thorne

19333 Autumn Woods Ave. Tampa FL 33647

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Barry Thorne

19333 Autumn Woods Ave. Tampa, FL 33647

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

Signature/Incorporator

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Date