

To: FL Dept of State
Subject: 000150-116282

From: Kim Weidenbach

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Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

000150-116282

From:

Account Name : CORPDIPECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FLORIDA PROFIT/NON PROFIT CORPORATION
CLAWLIN, INC.**

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To: FL Dept of State
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December 18, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: CLAWLIN, INC.
REF: W09000054856

PLEASE GIVE ORIGINAL SUBMISSION
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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Dale White
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FAX Aud. #: H09000259831
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PLEASE GIVE ORIGINAL SUBMISSION
DATE

P.O. BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF INCORPORATION
OF
CLAWLIN, INC.

The undersigned hereby forms a corporation for profit pursuant to Chapter 607 and/or 621, Florida Statutes.

ARTICLE I - NAME

The name of the Corporation shall be CLAWLIN, INC.

ARTICLE II - PRINCIPAL OFFICE

The address of the corporation is 250 Leucadendra Drive, Coral Gables, Florida 33156.

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is the transaction of any and all lawful business activities.

ARTICLE IV - SHARES

The Corporation is authorized to issue one hundred shares of common stock.

ARTICLE V - REGISTERED AGENT

The name and Florida street address of the registered agent is:

Lina Boschetti
250 Leucadendra Drive
Coral Gables, Florida 33156

ARTICLE VI - INCORPORATOR

The name and address of the incorporator is:

Lina Boschetti
250 Leucadendra Drive
Coral Gables, Florida 33156

The undersigned incorporator has executed these Articles of Incorporation this 5th day of January, 2010.


Lina Boschetti, Incorporator

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ACCEPTANCE OF REGISTERED AGENT DESIGNATION FOR:

CLAWLIN, INC.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated 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 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 as provided for in section 48.091, Florida Statutes.


Lina Boschetti

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