f		Electronic Fil e print this page an ber (shown below) the do	nd use it as		
		(((H10000		3)))	
		IN ILE PRIMI DENKI DENKE ITALI ADIL			
		H1000020	104323ABCM		
Ţ)T hit the REFRESI			
]		OT hit the REFRESI s page. Doing so wi			
] ,	from this				
] 		bivision of Co	ll generate	another cover sh	
] ,	from this	s page. Doing so wi	ll generate	another cover sh	eet.
	from this	bivision of Co	orporation : (850)	ns 617-6381	eet.
] ,	from this To:	bivision of Co Fax Number Account Name	rporatio : (850) : BERRI	ns 617-6381 2 & GIRALDO P.	eet. 10 SEP - 9 SECRETARY A.
] , .	from this To:	bivision of Co Fax Number Account Name Account Number	<pre>Il generate rporatio : (850) : BERRI : I1999</pre>	another cover sh ns 617-6381 2 & GIRALDO P. 0000017	eet. 10 SEP - 9 AM SECRETARY OF TALLAHASSEE F
] ,	from this To:	bivision of Co Fax Number Account Name	<pre>Il generate rporatio : (850) : BERRI : I1999 : (305)</pre>	another cover sh ns 617-6381 Z & GIRALDO P. 0000017 485-9300	eet. 10 SEP - 9 SECRETARY A.
] ,	from this To:	bivision of Co Fax Number Account Name Account Number Phone	<pre>Il generate rporatio : (850) : BERRI : I1999 : (305)</pre>	another cover sh ns 617-6381 Z & GIRALDO P. 0000017 485-9300	eet. 10 SEP - 9 AM SECRETARY OF TALLAHASSEE F
,	from this To: From:	bivision of Co Fax Number Account Name Account Number Phone	<pre>Il generate prporatio : (850) : BERRI : I1999 : (305) : (305)</pre>	another cover sh 617-6381 2 & GIRALDO P. 0000017 485-9300 485-1098	10 SEP -9 AM II: 22 SECRETARY OF STATE TALLAHASSEE FLORIDA
**Enter 1	from this To: From: the email a	s page. Doing so wi Division of Co Fax Number Account Name Account Number Phone Fax Number	<pre>Il generate prporatio : (850) : BERRI : I1999 : (305) : (305) busines</pre>	another cover sh ns 617-6381 2 & GIRALDO P 0000017 485-9300 485-1098 s entity to be	eet. 10 SEP -9 AH II: 22 IALLAHASSEE FLORIDA e used for future
**Enter t ann	from this To: From: the email a sual report	bivision of Co Fax Number Account Name Account Number Phone Fax Number	<pre>Il generate prporatio : (850) : BERRI : I1999 : (305) : (305) : busines r only or</pre>	another cover sh ns 617-6381 2 & GIRALDO P. 0000017 485-9300 485-1098 s entity to be ne email addre	eet. 10 SEP -9 AH II: 22 IALLAHASSEE FLORIDA e used for future

\$7**8**.75

Estimated Charge

:: #.

09/09/2010 15:00 3

3054851098

BERRIZ&GIRALDO

. PAGE 02

10 SEP . 9 HHIII

104323

ARTICLES OF CORPORATION

OF

UNISIGNS SUPPLIES, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

UNISIGNS SUPPLIES, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

(1) Transact any and all lawful business.

(2) Said corporation shall further have powers:

To have perpetual succession by its corporate

name:

UNISIGNS SUPPLIES, INC.

CLARA GIRALDO P.A. 4080 SW 84 AVE SUITE C MIAMI, FL 33155 (305) 485-9300

H10000 2004323.

100 2004323.

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

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.

ARTICLE V

The street address of the initial registered office and the name of the initial Registered Agent of this corporation shall be:

ALICIA Z. CHOCK 7905 NW 56 ST MIAMI, FL. 33166

The principal office shall be:

7905 NW 56 ST MIAMI, FL. 33166

H10000 200 432 3.

09/09/2010 15:00 3054851098 BERRIZ&GIRALDO

PAGE 04

00 200 4 3 2 3

ARTICLE \

The initial Board of Directors shall consist of a total of THREE(03) person, and the name and address of the person who is to serve as an initial director is:

MIGDONIA BROWN 7905 NW 56 ST MIAMI, FL. 33166

PRESIDENT

ALICIA Z. CHOCK 7905 NW 56 ST MIAMI, FL. 33166

VERONICA A. TROCONIS IBANEZ 7905 NW 56 ST MIAMI, FL. 33166

SECRETARY



The name and address of the incorporator executing these Articles of Incorporation is

> ALICIA Z. CHOCK 7905 NW 56 ST MIAMI, FL. 33166

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this SEPTEMBER 08,2010

СНОСК ALICIA 2 HI 0000 200432 3.

09/09/2010 15:00 3054851098

BERRIZ&GIRALDO

PAGE 05

FILED 10 SEP -9 AH II: 22

SECRETARY OF STATE TALLAHASSEE FLORIDA

12004323.

CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

UNISIGNS SUPPLIES, INC.

2. The Name and Address of the registered agent and office is

ALICIA Z. CHOCK 7905 NW 56 ST MIAMI, FL. 33166

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 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.

TEMBER 08.2010 Dated.

SIGNATURE

000 200 432 3.