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MiCHIAL Aller (Requestor's Name) 13011-11	e Holling St.		The second of th
(City, State, Zip) (Pho			
	Į	OFFICE USE ONLY	
CORPORATION NAME(S) & 1	DOCUMENT NUMI	ER(S) (if known):	
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Corporation (zama)		(Docalitativ &)	
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4. (Corporation Name)		(Document #)	
Walk in Pick up time		Certified Copy	1
Mail out Will wait	Photocopy	Certificate of Stat	
NEW FILINGS	AMENDME	NTS	5 To 10 To 1
Profit	Amendment		
NonProfit	Resignation of R.	A., Officer/Director	
Limited Liability	Change of Registe	red Agent	
Domestication	Dissolution/Withdra	awal	
Other	Merger		
			36/195
OTHER FILNGS	REGISTRATION QUALIFICATION		
Annual Report	Foreign		` <b>.</b>
Fictitious Name	Limited Partnership	,	
Name Reservation	Reinstatement		
	Trademark		
	Other		in all Listely

## ARTICLES OF INCORBORATION

of

•				
SLGNA ENTERPRISES (name of corpo		ATED		
The undersigned subscriber(s) to these Articles of Incorporation corporation under the laws of the State of Florida.	, natural perso	n(s) competent to	contract,	
ARTICLE I - CORPO	RATE NAME	•	- 249	05 kEB - 7 Pit
The name of the corporation is:			- 1. A	65
SIGNA ENTERPRISES	INCORPO	RATED		<u> </u>
ARTICLE II - DU	JRATION			33
This corporation shall exist perpetually unless dissolved accor-	ding to Floric	la law.		
ARTICLE III - P	URPOSE			line;
The corporation is organized for the purpose of engaging in an United States and the State of Florida.	y activities or l	ousiness permitted	under th	ic laws of the
" ARTICLE IV - CAPI	TAL STOCK			
The corporation is authorized to issue FIVE HUNDRED	shares (	500 ) of	ONE	
Dollar(s) (\$ 1.00 ) par value Common Stock		be designated *C	ommon (	Shares *
ARTICLE V - INITIAL REGISTER	ED OFFICE .	AND AGENT		
The street address of the Initial Registered Agent office and the			Agent at	that office is.
		<u> </u>		
NAME MICHAEL ALLEN HOLMES JR	···			
ADDRESS 13014 NORTH DALE MABRY		<u> </u>	ZIP	33618
TAMPA The principal office, if known, or the mailing adress of the c	PLORIDA Pornoration is:		7.11	
NAME MICHAEL ALLEN HOLMES IR	<del></del>			
ADDRESS 13014 NORTH DALE MABRY				22616
CTIY TAMPA	FLORIDA		ZIP	33618
This corporation shall have ONE 1 director(s) of the corporation are as full director(s) of the corporation are as full director(s).	ectors initially, at shall never		irectors (1). The	may be either e-names and
NAME MICHAEL ALLEN HOLMES JR	<del></del>			
ADDRESS 13014 NORTH MABRY				
CTIY TAMPA	STATE	FLORIDA	ZIP	33618
NAME				
ADDRESS	· ·			<del></del> - · · · ·
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ADDRESS	·			
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FORM 215: ARTICLES OF INCORPORATION, PAGE 1 PAGE 1			SEMINO	LE-MIAMI 01239

## ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

YAMB BUCHARL ALLEN HOLNES JR.		**************************************	
ADDRESS 13014 NORTH DALE MADRY			
CITY TAMPA	STATE	FLORIDA	ZIP 33618
NAMB			
ADDIUESS .			
CTIY	STATE		ZIP
VAMB	· · · · · · · · · · · · · · · · · · ·		
ADDRUSS			
CTTY	STATE		ZIP
	MA:	<u> </u>	(Scal)
			(Scal)
STATE OF FLORIDA	)		
COUNTY OF	SS		
before me, a Notary Public authorized to take acknowle appeared:  Signature			rth above, personally
Signature		Form of Identification	
Signature Signature		Form of Identification	
	oration, that I relied upor	Form of Identification Incorporation, who a the form of ident	

# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

OF

### SIGNA ENTERPRISES INCORPORATED

(name of corporation)

#### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)