

(SAMPLE LETTER OF TRANSMITTAL)

Date January 17, 1995

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

PAGE 2

Re: _____ PAST POSSESSIONS _____, Inc.
(name of corporation)

600001405096
-02/14/95--01025--010
*****61.25 *****61.25

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

600001405096
-02/14/95--01025--011
*****61.25 *****61.25

LINDA MENIN-JUDY ARANGO
(individual's name)

[Signature]

PAST POSSESSIONS

(name of corporation)

MAILING ADDRESS OF CORPORATION

18761 West Dixie Hwy Suite 177

Miami, Fla 33179

PHONE

(305)

2355514

Area Code

Number

Ext.

T. BROWN FEB 15 1995

ARTICLES OF INCORPORATION

of

PAST POSSESSIONS, INC.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

PAST POSSESSIONS, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue five hundred shares (500) of common stock
Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME:	<u>JUDY ARANGO</u>		
ADDRESS	<u>18761 WEST DIXIE HIGHWAY SUITE 177</u>		
CITY	<u>MIAMI</u>	FLORIDA	ZIP <u>33179</u>

The principal office, if known, or the mailing adress of the corporation is:

NAME	<u>PAST POSSESSIONS, INC.</u>		
ADDRESS	<u>18224 WEST DIXIE HIGHWAY</u>		
CITY	<u>MIAMI</u>	FLORIDA	ZIP <u>33179</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>JUDY ARANGO</u>		
ADDRESS	<u>18761 WEST DIXIE HIGHWAY SUITE 177</u>		
CITY	<u>MIAMI</u>	STATE <u>FLORIDA</u>	ZIP <u>33179</u>
NAME	<u>LINDA MENIN</u>		
ADDRESS	<u>555 NE 15 STREET APARTMENT 26A</u>		
CITY	<u>MIAMI</u>	STATE <u>FLORIDA</u>	ZIP <u>33132</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VII - INCORPORATORS

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

NAME	JUDY ARANGO		
ADDRESS	18761 WEST DIXIE HIGHWAY SUITE 177		
CITY	MIAMI	STATE	FLORIDA ZIP 33180
NAME	LINDA MENIN		
ADDRESS	555 NORTH EAST 15 STREET APT # 26A		
CITY	MIAMI	STATE	FLORIDA ZIP 33132
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 8 day of February 19 95.

Judy Arango (Seal)
Linda Menin (Seal)
 (Seal)

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

PAST POSSESSIONS, INC.

(name of corporation)

FILED
95 FEB 13 AM 8:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 18761 WEST DIXIE HIGHWAY SUITE 177

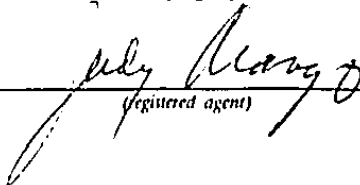
MIAMI, FLORIDA. 33180

has named JUDY ARANGO

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

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)

P95000012627

Requestor's Name

Linda Menin
11034 Neptune Drive
Cooper City, FL 33026

300002107743--0

-03/10/97--01002--001

*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail cu: ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED
97 MAR 19 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-863/9
PFC
3/11

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 11, 1997

LINDA MENIN
11034 NEPTUNE DR.
COOPER CITY, FL 33026

SUBJECT: PAST POSSESSIONS, INC.
Ref. Number: P95000012627

We have received your document for PAST POSSESSIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6880.

Karen Gibson
Corporate Specialist

Letter Number: 097A00012240

RECEIVED
MAR 17 AM 8:54
DIVISION OF CORPORATIONS

Florida Department of State, Sandra B. Mortham, Secretary of State

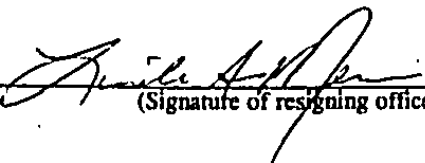
OFFICER / DIRECTOR RESIGNATION

I, Linda A. Menini, hereby resign as Director
(Title)

of Past Possessions, Inc.
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.


(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 MAR 19 PM 1:25

FILED

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

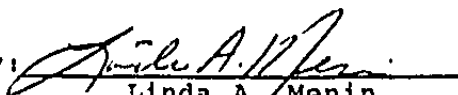
RESIGNATION OF CORPORATE DIRECTOR AND OFFICER

Gentlemen:

I, LINDA A MENIN, hereby tender my resignation as Director and Officer of PAST POSSESSIONS, INC., a Florida corporation, to take effect as of this 15 day of November, 1995.

Dated this 15 day of November, 1995.

By:


Linda A. Menin