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TRANSMITTAL LETTER

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

500001416435 -02/27/95--01084--015 ****122.50 *****122.50

SUBJECT:	AUX K	IN, INCORPO	RATED	
(Proposed corporat	e name - must include su	iffix)	
Enclosed is an original for:	and one (1) cop	by of the articles of i	incorporation and a	check
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	RECRETARY OF STATE ISION OF COMPONION 35 FEB 27 PN 3: 08
FROM:	FALL X	FUH, INC. (printed or typed)		8 37 38
	4535	F PARKVIEW Address	DRIVE	
	/ .	LATON, KC. ty, State & Zip	33433	
		391-747B Telephone number		
	Doyania	i elebriotis tiffliffet		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: FAUX FUN, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

FAUX FUN, INC. 4535 F PARKVIEW DR BOCA PATON, FC. 33433
ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000 SHARES AT \$1, per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SYLVIA 6. GRIKKITH 6535 F PARKVIEW DR. BUCA RATEN EL 33433

ARTICLE V INCORPORATORIS

tion is(are):	lear andless(62) Of the like	+ 4	•
3	YUUIA 6.6EI 4535F PARKUIE BICA RATON	FFITH EN DR.	(PRESIDENT)
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
The undersigned inc	corporator(s) has(have) ex	ecuted these Article	es of Incorporation this
22	day of <i>FEBRUR</i>	RY , 19.95	
·····	Sylvia Signation	Suffit	
	Signati	ure ///	

Articles of Incorporation Filing Fee - \$35

Signature

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: FAUX FUN, INC.					
2.	The name and address of the registered agent and office is:					
	Sylvia 6. GRIFFITH					
(Name)						
	6535 & PARKUIGINDE					
(P.O. Box not acceptable)						
	BOCA RATON EC. 33433 (City/State/Zip)					
	(City/Śtate/Zip)					
	4					

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.

Sylving Siffied 2/20/95 FEB 27 PH 3:09

DIVISION OF CORPORATIONS

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