

CORPORATION INFORMATION
SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32310
904-222-9171
904-222-0193 FAX

800-342-8086

P95000017561

95 MAR -3 AM 11:15

CSC networks DIVISION OF CORPORATION

MAIL TO:
P.O. BOX 5028
TALLAHASSEE, FL 32314

ACCOUNT NO. : 072100000032

REFERENCE : 552960 80382A

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : 970.00

ORDER DATE : March 3, 1995

ORDER TIME : 10:38 AM

ORDER NO. : 552960

CUSTOMER NO: 80382A

CUSTOMER: Jon A. Hinden, Esq
GOODMAN WEBBER & HINDEN

Post Office Box 8549

Pembroke Pines, FL 33084-0549

100001420761

DOMESTIC FILING

P95000017561

NAME: EMERALD SHORES, INC.

XXXXXRUSH WILL WAIT!!!!

ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jodie Krebs

EXAMINER'S INITIALS:

Jm
3-13-95
01

FILED
95 MAR -3 AM 11:20
SEC. OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
EMERALD SHORES, INC.

FILED
95 MAR -3 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

EMERALD SHORES, INC.

The address of the principal office of this corporation shall be 12345 Northeast 12th Court, North Miami, Florida 33161, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Information Services, Inc.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The names and addresses of the initial members of the Board of Directors are:

Ronald M. Schlom
Dir.

12345 Northeast 12th Court
North Miami, Florida 33161

ARTICLE VII. OFFICERS

The name and addresses of the initial officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

Ronald M. Schlom
Pres./Sec.

12345 Northeast 12th Court
North Miami, Florida 33161

Shawn O'Toole
V.Pres./Treas.

Same

ARTICLE VIII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Information Services, Inc.
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Information Services, Inc., has hereunto set their hand and seal of Corporation Information Services, Inc., on March 3, 1995.

CORPORATION INFORMATION SERVICES, INC.

By: Gail Shelby
Its Agent, Gail Shelby

FILED
95 MAR -3 11:27
TALLAHASSEE

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Information Services, Inc., a Florida corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION INFORMATION SERVICES, INC.

By: Gail Shelby
Its Agent, Gail Shelby

LEL/jwk

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
FLORES TAX

800-342-8086

P95000017561



ACCOUNT NO. : 072100000032
REFERENCE : 552960 80382A
AUTHORIZATION : *Patricia Pyatt*
COST LIMIT : 9 35

ORDER DATE : March 3, 1995

ORDER TIME : 4:07 PM

ORDER NO. : 552960

CUSTOMER NO: 80382A

800001484469

CUSTOMER: Jon A. Hinden, Esq
Goodman Webber & Hinden
Post Office Box 8549

Pembroke Pines, FL 33084-0549

CHANGE OF AGENT

NAME: EMERALD SHORES, INC.

55 MAR 21 AM 11:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY

CONTACT PERSON: Gail L. Shelby

3/21

*Jay
K.A.
CG.*

Charter No: P95000017561

Date Filed Mar. 3, 1995

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

In pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1503, Florida Statutes, the under-
signed corporation, organized under the laws of the State of Florida, submits the following statement for
the purpose of changing its registered office and registered agent in the State of Florida.

The name of the corporation is: Emerald Shonen, Inc.

The name and address of its present registered agent is:

CORPORATION INFORMATION SERVICES, INC.
1201 Hays Street
Tallahassee, Florida 32301

SECRETARY
TALLAHASSEE FLORIDA

05 MAR 21 AM 11:35

The name and street address to which its registered agent is to be changed is:
(P.O. BOX NOT ACCEPTABLE)

Jon A. Hinden, Esq.

6200 Stirling Road

Davie, FL 33314

i. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.

ii. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.


Ronald M. Schlom, Pres
(Typed or printed name and title)

Signature 
(President or Vice President)

Date Mar. 6, 1995

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name Jon A. Hinden

Signature 
(Agent)

Date Mar. 6, 1995

P95000017561

BURTON O'TOOLE
495 West Park Road
Hollywood, Florida 33021
Florida (State)
950-6261 (Area) 626-0436 (Code)

(City, State, Zip) (Phone #)

OFFICE USE ONLY

95 NOV 27 PM 12:52
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 out Will wait Photocopy Certificate of Status

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

100001646891
-11/28/95--01046--009
*****35.00 *****35.00

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

O/D resign.

VS DEC 1 1995

Examiner's Initials

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

OFFICER / DIRECTOR RESIGNATION

FILED
95 NOV 27 PM 12:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

I, Shawn O Toole, hereby resign as Vice President/Treasurer
(Title)

of Emerald Shores, Inc.
(Name of Corporation)

a corporation organized under the laws of the State of Florida

That the corporation has been notified in writing of the resignation.

Shawn O Toole
(Signature of resigning officer/director)

FILING FEE IS \$35.00

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