P50002867

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

4 COUNTY 1 4 St1 5 BU4 -03/16/95 --01096--011 ****122.50 ****122.50

SUBJEC	T: RAM OFFICE VRODRETS INC.		
(Proposed corporate name)			
Enclosed \$/>	is an original and one (1) copy of the articles of incorporation and a check for $\frac{1}{2}$		
FROM:	RANDI. Deay		
	Name (printed or typed)		
	6635 WEST COMPRESENT BLUD # 105		

3/4/5

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

ARTICLES OF INCORPORATION

RAM OTTILE PRODUCTS INC.

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

The name of the corporation shall be: Rom Office Roducts; Inc.

ARTICLE II PRINCIPAL OFFICE

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

6635 W. Commercial BLUD #108 TAMARAC, FZ. 33319

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at 100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KANDI DROY 6635 N. BOMMERCIAL BLUD HIOS TANIARAR, FE. 3.33/9

ARTICLE V INCORPORATOR(8)

The name(s) and street addr	ess(es) of the incorpore	retor(s) to these Articles of Incor	pora-
ALYSON GO	DOMIN, CRESTOWN	T. Director & Dela	Nocces
RANDI . Dieg	y Sicry-Trins	Theretor, + Dele Income Director, + Dele Income Director, + Dele Income Director, + Dele Income Bury His	NOORF
(633	5- N. Committee	PINC BLUD 4/18	
TAMA	Rne, Te. 33319	1	
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	·		
The undersigned incorporator	rie) hasibayat ayaa wad	Adhan Ant I a	
12	MARCH	these Articles of Incorporation	this
day of		, 19	
A A	A 2		
(x) Alyron	Jookman		
(2) Candi D	Signature		
(Signature		
	Signature		

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions 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: Lam Office Products INC.
-	
2.	The name and address of the registered agent and office is:
	6635 W. Commekeine Bein H 108
	(P.O. Box NOL acceptable)
	- TAMARAR, FL 333/9
	(City/State/Zip)

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.

SIGNATURE

DATE

REGISTERED AGENT FILING FEE: \$35.00