

THE COMPANY CORPORATION

Corporate Records Bureau Division of Corporations P.O. Box 6327 Tallahassee FL 32314

RE:

Kalish Quality Development Services Inc.

P3302611KAKAL

Dear Sir or Madam:

Enclosed please find Articles of Incorporation, Certificate of Acceptance and our check(es) in the amount of \$70.00 for Kalish Quality Development Services Inc.

Please file at your earliest convenience and return confirmation to my attention at the address which is listed above.

Please feel free to contact me directly at 1-302-575-0440, ext. 208 with questions regarding the enclosed application.

Sincerely,

Kimberly Andras

enc.

800001440258 -03/27/95--01039--015 *****70.00 *****70.00

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ARTICLES OF INCORPORATION OF

Kalish Quality Development Services, Inc.

The undersigned natural person(s), of the age of 21 or more, acting to form a corporation under the corporate laws of the state of Florida do hereby certify the following:

FIRST: The name of the corporation shall be Kallsh Quality Development Services, Inc.

SECOND: The address of the initial registered office of the corporation is 200 - A John Knox Road, Tallahassee FL 32303-6643, County of Leon. The name of the registered agent located at said address is Larry Wolfe.

THIRD: The principal address of the corporation is 11063 Chandler Drive, Cooper City FL 33026-4379.

FOURTH: The purpose for which this corporation is organized shall be to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act.

FIFTH: The total authorized stock of this corporation is divided into 100 shares of no par value.

SIXTH: The number of directors constituting the initial board of directors is two, and the name(s) and address(cs) who will serve as directors until the first annual meeting of shareholders or until their successors are as follows:

Jessica S. Kalish and Marya A. Keegan 11063 Chandler Drive, Cooper City FL 330° 1739

SEVENTH: The duration of the corporation is perpetual.

EIGHT: This is Close Corporation.

NINTH: The name(s) and address(es) of the persons who are to act as incorporator(s) are as follows:

Kimberly Andras c/o The Company Corporation Three Christina Centre, 201 N. Walnut St., Wilmington DE 19801

We (I), the undersigned, being all the incorporators of the corporation identified above, declare that we have examined the foregoing this 13th day of March, 1995.

State of Delaware

County of New Castle

THE FOREGOING instrument was acting wiled and sworn to before me this 13th day of March,

1995 by Kimberly Andras NOTARY PUBLIC-DELAWARE

Appointed October 6, 1994 Term 2 Years

Notary Public

This document was prepared by Kimberly Andras, Three Christina Centre, 201 N. Walnut Street, Wilmington DE 19801 (302) 575-0440

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICLE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS MAY BE SERVED.

In compliance with Sesubmitted:	ction 607.1507, Florida Stat	utes, the followingd
First, this Kalish	Quality Development Serv	vices, Inc.
desiring to organize under the	laws of the state of Florida	with its principal place कि
business located in the city of	Cooper City	, State of
Florida, has named Larry Wo	lfe located at 200 - A John I	Knox Road, Tallahassee FL
32303-6643 as its agent for ser	rvice of process within Flori	da.
Having been named to	accept service of process fo	or the above stated
corporation, at the place desig	gnated in this Certificate, I h	nereby agree to act in this
capacity, and I further agree to	o comply with the provision	s of all statutes relative to
the proper and complete perfe	ormance of my duties.	4
		Jany Jany
	Larry Wol	fe
		3/13/95
	Date	

THE COMPANY CORPORATION Three Christina Centre • 201 N. Walton Street • Wilhungton, Delawate 19801 • Telephone (302) 575-0440 • Fax (102) 575-1346 P95000023873 April 9, 1996

Corporate Records Bureau Division of Corporations P.O. Box 6327 Tallahassee FL 32314

RE:

Kalish Quality Development Services Inc.

9503243302611

7000001:915:00 -05/08/96--01096--014 *****35.00 *****35.00

Dear Sir or Madam:

Enclosed please find Statement of Change of Registered Agent, and our check(es) in the amount of \$35.00 for Kalish Quality Development Services Inc.

Please file and return filed documents to my attention at your earliest convenience.

Please feel free to contact me directly at 1-302-575-0440, ext. 2208 with questions regarding the enclosed application.

Sincerely,

Kimberly Andres

enc.

RA Chg.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Fig. 104.104 submits the following statement in order to change its registered offic 3 or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: KALISH QUALITY DENGT PM OUT
SERVICES, IM.
1b. The mailing address of the corporation is: 11063 Chandler Drive Copper City 1 FL 33026-4739
3/24/05 2000
Larry Wolfe
200 - A John Knox Rd.
2. The name and address of the current registered agent and office: Larry Wolfe 200 - A John Knox Rd. Tallahassee, FL 32303-6643
2. The pains and address of the new registered agent and office:(F.O. Box not Acceptable)
MARYA A. KEESAN
11063 Chandler Drive
Cooper City, FL 33026-4739
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer to authorized by the board.
Maya Officer, chairman or 4/2/96 (Date)
(Signature of an officer, chairman or (Date)
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, Thereby accept the appointment as registered agent and agree to actin this capacity. 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 egistered agent.
(Signature of Registered Agent) / (Date)