# P9500026783

Date 3/27/95

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

Re: Signs X press of South FIA. Inc. (name of corporation)

#### 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,

5400000144515155 -03/31/35--010/5--002 -\*\*\*\*122,50 000122,50

Signs X piess of South FIA.

(name of corporation)

MAILING ADDRESS OF CORPORATION—

501 5W 5 AVE

HAllANDALE FI. 33009

PHONE

(305) 920-0504

Area Code Number Ext.

individual's name)

## ARTICLES OF INCORPORATION of

Sin Vaca		A
Dignis X press o	me of corporation)	9. INC.
The unders'gned subscriber(s) to these Articles of In corporation under the laws of the State of Florid	corporation, natural person(s) compete	nt to contract, hereby form a second
ARTICLE .	I - CORPORATE NAME	<u> </u>
MMI II		: : : : : : : : : : : : : : : : : : :
Signs X press	Of South F	TA. TNE
APTIC	LE II - DURATION	0 10
This corporation shall exist perpetually unless diss		2
	CLE III - PURPOSE	
The corporation is organized for the purpose of eng United States and the State of Florida.	gaging in any activities or business perm	itted under the laws of the
ARTICLE	IV - CAPITAL STOCK	
The corporation is authorized to issue Three A	Undred _shares (300 ) of	ONE
Dollar(s) (\$	nmon Stock, which shall be designated	d "Common Shares."
ARTICLE V - INITIAL I	REGISTERED OFFICE AND AGENT	r
The street address of the Initial Registered Agent of	ffice and the name of the Initial Registe	ered Agent at that office is:
NAME TOCK Katz		
ADDRESS 501 SW 5 AVE		
CITY HAllondale	FLORIDA F/	zir <i>33 009</i>
The principal office, if known, or the mailing adre		21 37 CO9
	= South FlA.	
ADDRESS 501 515 5 AVE		
CITY HAllandele	FLORIDA	ZIP 33009
ARTICLE VI - INIT	TIAL BOARD OF DIRECTOR."	<u> </u>
	directors initially. The number	of directors may be either one (1). The names and
NAME Todd Katz		
ADDRESS 501 5W 5 AUF		
CITY HALL ONDOLE	STATE F/	ZIF 33009
NAME POTOR LOURIA		
211	D <sub>A</sub>	
CTTY Hallyward	STATE F/	zip 3302/
NAME		
ADDRESS		
CITY		
	STATE	ZIP

#### ARTICLE VII - INCORPORATORS

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

NAME JOHN KATZ		
ADDRESS 501 SW 5 AUF		· · · · · · · · · · · · · · · · · · ·
CITY HAMANDALE	STATE F/.	zip 33009
NAME Peter Lauria		
ADDRESS 3415 Emerald OAK	S DA	
CITY HOllyword	STATE F/	2193304/
NAME		
ADDRESS		
СПУ	STATE	ZIP
IN WITNESS WHEREOF, the undersigned subscribe day of MAICH, 1995.	er(s) have executed these Articles of In	ncorporation this <u>27</u>
	July Koto	(Scal)

\_(Scal)

### CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

OF

Signs X Press of South FIA. INC.

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 <u>501 SW 5 AVE</u>

has named Todal KATZ

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.