

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

95 APR 20 PM 3:01

DB 4/20/95

REQUEST TAKEN CONFIRMED APPROVED
 DATE _____
 TIME _____ CK No. _____
 BY *PK* _____

WALK-IN Will Pick Up *4/20 12:12 P*

RE: Fox Life & Solutions, Inc.

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. Fila		
Corp. Record Search		
Ltd. Partnership Fila		
<input checked="" type="checkbox"/> Foreign Corp. Fila		
<input checked="" type="checkbox"/> () Cert. Copy(s)		
Art. of Amend. Fila		
Dissolution/Withdrawal		
C U S-		
<input checked="" type="checkbox"/> Fictitious Name Fila		
Name Reservation	800001461298	
Annual Report/Reinstatement	04/20/95-01062-007	
Reg. Agent Service	****122.50	****122.50
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 Fila		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s, Copies		
Courier Service		
Shipping/Handling		
Phone ()		
Top Priority		
Express Mail Prep.		
FAX () pgs.		

SUBTOTALS

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$
	\$

Please remit Invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

ARTICLES OF INCORPORATION
OF
FOX LITE & SOLUTIONS, INC.

FILED
95 APR 20 PM 3:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I

NAME

The name of this corporation shall be :

FOX LITE & SOLUTIONS, INC.

ARTICLE II

PURPOSE

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$1.00 par value common stock.

ARTICLE IV

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is:

7310 W MCNAB RD # 207
TAMARAC, FLORIDA 33321

and the initial registered agent of this corporation at the above address is:

STUART HOWITT

ARTICLE V

INITIAL PRINCIPAL OFFICE

The initial principal office of this corporation shall be:

528 NE 13TH STREET
FT. LAUDERDALE, FLORIDA 33304

ARTICLE VI

DIRECTORS

This corporation shall have three directors initially. The number of Directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one. The names and addresses of the initial Directors of this corporation are:

IVO TEIXEIRA
528 NE 13TH STREET
FT. LAUDERDALE, FLORIDA 33304

AND

SILVIO PALHARES
528 NE 13TH STREET
FT. LAUDERDALE, FL. 33304

AND

MARK LEVINE
528 NE 13TH STREET
FT. LAUDERDALE, FL. 33304

ARTICLE VII

INCORPORATOR

The name and address of the person signing these Articles is:

STUART HOWITT
7310 W MCNAB RD # 207
TAMARAC, FLORIDA 33321

ARTICLE VIII

POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

ARTICLE IX

INDEMNIFICATION

The corporation shall indemnify any director or officer or former director or officer to the full extent permitted by law.

ARTICLE X

AMENDMENT

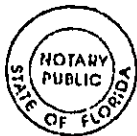
This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed
these Articles of Incorporation on this 19th day of
April, 1995.

[Signature]

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 19th day of April,
1995 personally appeared before me, the undersigned
authority, Stuart Howitt, to me well known and known
to me to be the individual described in and who executed the
foregoing Articles of Incorporation, and acknowledged before
me that he executed the same freely and voluntarily for the
purpose therein expressed.



WILLIAM S. HOLTON
My Comm Exp. 10/20/96
Bonded By Service Ins
No. CC237370

☒ Personally Known ☐ Other I. O.

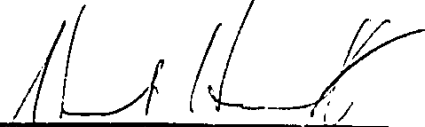
[Signature]
Notary Public

My Commission Expires:

STUART HOWITT IS PERSONALLY
KNOWN BY ME

ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above named corporation at a place designated in these Articles of Incorporation, I hereby accept to act in this capacity, and agree to comply with the provisions of Chapter 48.091, Florida Statutes, relative to keeping open said office for service of process.


STUART HOWITT
Registered Agent

FILED
95 APR 20 PM 3:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

P95000031113

Mark Levin
(Requestor's Name)
528 NE 13th St.
(Address)
 Ft. Lauderdale, FL 33304
(City, State, Zip) (Phone #)

100001581041
-09/11/95--01015--002
*****35.00 *****35.00

OFFICE USE ONLY

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

SH SEP 12 1995

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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 SEP -8 PM 1:07

Examiner's Initials

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

OFFICER / DIRECTOR RESIGNATION

I, MARK LEVIN, hereby resign as SECRETARY
(Title)

of FOX LITE & SOLUTIONS 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.

Mark Levin
(Signature of resigning officer/director)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 SEP - 8 PM 1:07

FILING FEE IS \$35.00

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