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95 APR 26 PM 12:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

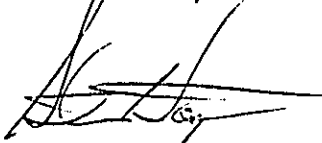
April 25, 1995

Please process the enclosed Articles of Incorporation and return using the provided FEDEX envelope.

If you have any questions you may reach me at 1-800-780-3577.

Your prompt attention is greatly appreciated.

Thank You,



Steve Hopkins  
13499 Biscayne Blvd.  
N. Miami, Fl. 33181

9000031465469  
-04/26/95--01085--013  
\*\*\*\*122.50 \*\*\*\*122.50

D. BROWN MAY - 2 1995

ARTICLES OF INCORPORATION  
OF  
TOWER 18 HOLDINGS, INC.

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ARTICLE ONE

THE NAME OF THE CORPORATION IS TOWER 18 HOLDINGS, INC.

ARTICLE TWO

THE PERIOD OF ITS DURATION IS PERPETUAL.

ARTICLE THREE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS THE TRANSACTION OF ANY OR ALL LAWFUL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE FLORIDA CORPORATIONS ACT.

ARTICLE FOUR

THE AGGREGATE NUMBER OF SHARES WHICH THE CORPORATION SHALL HAVE AUTHORITY TO ISSUE IS 500 OF NO PAR VALUE.

ARTICLE FIVE

THE CORPORATION WILL NOT COMMENCE BUSINESS UNTIL IT HAS RECEIVED FOR THE ISSUANCE OF SHARES CONSIDERATIONS OF THE VALUE OF \$ 1,000.00 CONSISTING OF MONEY, LABOR DONE OR PROPERTY ACTUALLY RECEIVED.

ARTICLE SIX

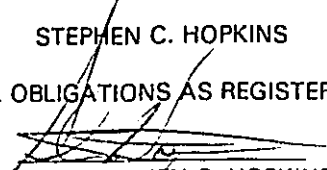
THE STREET ADDRESS OF ITS INITIAL REGISTERED OFFICE ALSO THE PRINCIPAL AND MAILING ADDRESS IS:

13499 BISCAYNE BOULEVARD, 18TH FLOOR  
MIAMI, FL 33181

AND THE NAME OF ITS INITIAL REGISTERED AGENT AT SUCH ADDRESS IS

STEPHEN C. HOPKINS

WHO ACCEPTS ALL OBLIGATIONS AS REGISTERED AGENT.

  
STEPHEN C. HOPKINS

ARTICLE SEVEN

THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS IS 1, AND THE NAMES AND ADDRESSES OF THE PERSON OR PERSONS WHO ARE TO SERVE AS DIRECTORS UNTIL THE FIRST ANNUAL MEETING OF THE SHAREHOLDERS OR UNTIL THEIR SUCCESSORS ARE ELECTED AND QUALIFIED ARE:

STEPHEN C. HOPKINS  
13499 BISCAYNE BOULEVARD, 18TH FLOOR  
MIAMI, FL. 33181

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ARTICLE EIGHT

THE BOARD OF DIRECTORS IS EMPOWERED TO MAKE, ALTER OR REPEAL THE BYLAWS OF THE CORPORATION WITHOUT RESTRICTION OF THEIR POWERS CONFERRED BY STATUTE.

ARTICLE NINE

THE NAME AND ADDRESS OF EACH INCORPORATOR IS:

STEPHEN C. HOPKINS  
13499 BISCAYNE BOULEVARD, 18TH FLOOR  
MIAMI, FL 33181

ARTICLE TEN

THE POWERS OF THE INCORPORATORS CEASE UPON FILLING OF THE ARTICLES OF INCORPORATION.

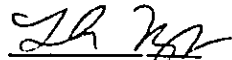
  
STEPHEN C. HOPKINS

STATE OF FLORIDA)

ss

COUNTY OF DADE )

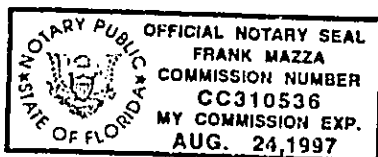
SWORN AND SUBSCRIBED TO AND BEFORE ME THIS 6 DAY OF April, 1995



NOTARY PUBLIC  
STATE OF FLORIDA AT LARGE

MY COMMISSION EXPIRES:

*personally known*



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 OCT -2 AM 10:58

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-10/17/96--01024--012  
\*\*\*\*375.00 \*\*\*\*375.00



DOCUMENT # **P95000034039**

1 Corporation Name

**TOWER 18 HOLDINGS, INC.**

Principal Place of Business

13499 BISCAYNE BOULEVARD  
18TH FLOOR  
MIAMI FL 33181

Mailing Address

13499 BISCAYNE BOULEVARD  
18TH FLOOR  
MIAMI FL 33181

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2 New Principal Office Address, If Applicable

3 New Mailing Office Address, If Applicable

4 Date Incorporated or Qualified  
To Do Business in Florida

**04/26/1995**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

☒ Applied For

☐ Not Applicable

City & State

City & State

6

CERTIFICATE OF STATUS DESIRED ☐

**\$8.75** Additional Fee required  
for a Certificate of Status

Zip

Country

Zip

Country

7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	HOPKINS, STEPHEN C	13499 BISCAYNE BOULEVARD	MIAMI FL 33181

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HOPKINS, STEPHEN C  
13499 BISCAYNE BOULEVARD  
18TH FLOOR  
MIAMI FL 33181

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

Zip Code

**FL**

10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

**9/25/96**

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information  
on intangible tax.)

12 I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Stephen Hopkins*

**9/25/96**

**305-945-4444**

Date

Daytime Phone #