

P9 5000034340

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

SUBJECT: Sal Mancini, Inc.
(proposed corporate name)

Enclosed please find an original copy of the Articles of
Incorporation for the above corporation and a check in the
amount of \$70.00.

FROM: Sal Mancini, Inc.
Name

785 Heron Road
Address

Fort Lauderdale, Florida 33326
City, State & Zip

(305) 384-9334
Telephone Number

200001468972
-05/01/95--01033--005
*****70.00 *****70.00

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 28 AM 10:56

Note: Additional copy of articles is needed when certified
copy is requested.

ARTICLES OF INCORPORATION

OF

SAL MANCINI, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

Sal Mancini, Inc.

ARTICLE II

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

Sal Mancini, Inc.
785 Heron Road
Fort Lauderdale, Florida 33326

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares.

ARTICLE IV

The name and address of the initial registered agent is:

Salvatore A. Mancini
785 Heron Road
Fort Lauderdale, Florida 33326

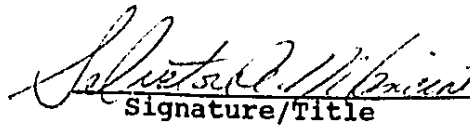
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ARTICLE V

The name and street address of the incorporator to these Articles of Incorporation is:

1. Salvatore A. Mancini
785 Heron Road
Fort Lauderdale, Florida 33326

The undersigned has executed these Articles of Incorporation this 21st day of April, 1995.

 President/Treas.
Signature/Title

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CERTIFICATE OF DESIGNATION
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: Sal Mancini, Inc.

2. The name and address of the registered agent and office is:

Salvatore A. Mancini
(Name)

785 Heron Road
(P. O. Box not acceptable)

Fort Lauderdale, Florida 33326
(City/State/Zip)

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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

Salvatore A. Mancini

DATE

4-25-95