

P95000034762

Lisa Lange  
(Requestor's Name)  
98 Hendricks Isle #1  
(Address)  
Ft. Lauderdale, FL  
(City, State, Zip) (Phone #) 33301

FILED

95 APR 28 AM 10:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OFFICE USE ONLY

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-04/28/95--01090--020  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**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

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

# CERTIFICATE OF INCORPORATION

OF

Island International Wholesale Suppliers, Inc.

The undersigned, being all of legal age, for the purpose of forming a corporation pursuant to the laws of the State of Florida

do(es) hereby certify, adopt and set forth the following Articles of Incorporation:

FIRST: The name of the corporation is Island International Wholesale Suppliers, Inc.

SECOND: The corporation is formed under the laws of this State and is authorized and has the power to transact any and all lawful acts and business.

(OPTIONAL ONLY IF YOUR STATE WILL NOT ACCEPT THE GENERAL POWERS CLAUSE SET FORTH ABOVE). The corporation is authorized and empowered to transact all lawful acts and business including without limitation, the purpose of:

\_\_\_\_\_

\_\_\_\_\_

THIRD: The duration of the corporation shall be perpetual unless its existence shall be sooner terminated as set forth below:

\_\_\_\_\_

FOURTH: The office of the corporation is to be located at

98 Hendricks Isle #1

Ft. Lauderdale, Fla 33301

FIFTH: The aggregate number of shares which the corporation shall have the authority to issue is 500

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shares of Common Stock

with the par value of \$1.00

SIXTH: The number of directors shall be as set forth in the by-laws.

(OPTIONAL ONLY IF YOUR STATE REQUIRES THIS INFORMATION; OTHERWISE YOU WILL PROBABLY WANT TO KEEP THIS INFORMATION PRIVATE)

The following shall serve as director(s) until their successors shall have been elected and qualified:

LISA LANGE, President \_\_\_\_\_

\_\_\_\_\_

SEVENTH: The incorporators and their address are

LISA LANGE, President 98 Hendricks Isle #1  
Ft. Lauderdale, Fla 33301

\_\_\_\_\_

\_\_\_\_\_

EIGHTH: If necessary under state law, The Secretary of State is designated as agent of the corporation upon whom process against it may be served. Otherwise the following person hereby consents to act as statutory agent:

John P. Reeve  
98 Hendricks Isle #1  
Ft. Lauderdale, Fla 33301

Printed Name

John P. Reeve

LISA LANGE

Signature

[Signature] Registered Agent  
Lisa Lange Incorporator

**ACKNOWLEDGMENTS**

STATE OF FLORIDA

COUNTY OF BROWARD

On APRIL 24<sup>th</sup>, 1998, before me, a Notary Public,

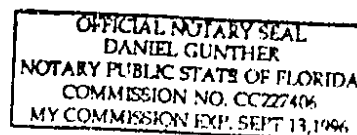
personally appeared JOHN P. REEVE AND LISA  
LANGE.

LISA LANGE DL. FL. # R100 532. 58. 626

JOHN REEVE DL. FL. # R100. 475. 58. 350. 0

to me personally known and known to me to be the same person(s) described in and who executed the foregoing instrument, and who acknowledged to me having executed the same.

[Signature]  
NOTARY PUBLIC  
DANIEL L. GUNTHER



SEAL

\_\_\_\_\_  
\_\_\_\_\_

NINTH: Additional optional provisions are as follows:

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IN WITNESS WHEREOF, the undersigned incorporator(s) have subscribed this Certificate of  
Incorporation on

\_\_\_\_\_, 199\_\_\_\_.