SCHNEIDER
PEARLSTINE
& HEFFNER

Attorneys at Law

Harvey R. Schneider
Adam G. Heffner

Of Counsel
*Jules Pearlstine**

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P95000037091

Ma[illegible]

Flor[illegible]ent of [illegible]
Division of C[illegible]por[illegible]io[illegible]
[illegible]09 East [illegible]
[illegible]llahassee, Florida 32399

Re: MARBLE KARE U.S.A. OF SOUTH FLORIDA, INC.

To whom it may concern:

Enclosed please find the Articles of Incorporation for the above-referenced together with our check in the sum of $78.75 representing the required filing fee and certificate fee. Also enclosed is a copy of the Articles which we would appreciate your stamping "filed" and returning to us in the enclosed self-addressed, stamped envelope. We do not need a certified copy at this time.

If you have any questions regarding the enclosures or these instructions, please do not hesitate to contact me. Thank you for your assistance in this matter.

Very truly yours,

SCHNEIDER, PEARLSTINE & HEFFNER

H Schneider

Harvey R. Schneider

HRS:lll
Enclosures
cc: Mr. Kevin Ressler

ARTICLES OF INCORPORATION

ARTICLE I

The name of this corporation is MARBLE KARE U.S.A. OF SOUTH FLORIDA, INC.

ARTICLE II

The principal office and mailing address of the corporation is 922 Clint Moore Road, Boca, Raton, Florida 33487.

ARTICLE III

The authorized stock shall consist of 1000 shares of common voting stock of $1.00 par value for each share. The consideration for shares shall be as established from time to time by the Board of Directors. Upon a dissolution, the shareholders shall be entitled to the net assets of the corporation as provided by law.

ARTICLE IV

The name of the initial registered agent of the corporation is KEVIN RESSLER and the street address of the initial registered office of the corporation is 922 Clint Moore Road, Boca Raton, Florida 33487.

ARTICLE V

The names and address of the Incorporator and initial Director is Kevin Ressler, 922 Clint Moore Road, Boca Raton, Florida 33487.

ARTICLE VI

The power to adopt the initial by-laws shall be vested in the initial Board of Directors.

ARTICLE VII

The purpose or purposes for which this corporation is organized shall be to transact any lawful business. The corporation shall be entitled to exercise all of the powers provided by law.

ARTICLE VIII

The corporation shall have perpetual existence unless dissolved pursuant to law.

ARTICLE IX

Pre-emptive rights of shareholders may either be provided for in the by-laws or by resolution of the Board of Directors.

Dated this 28th day of April, 1995.

FILED
95 MAY -3 PM 3:34
TALLAHASSEE, FLORIDA

INCORPORATOR:

KEVIN RESSLER

ACCEPTANCE BY REGISTERED AGENT:

The undersigned states that he is familiar with and does hereby accept and agree to abide by all of the obligations of acting and performing as Registered Agent for the corporation as required by law.

REGISTERED AGENT:

KEVIN RESSLER

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $220 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION REINSTATEMENT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 OCT -9 PM 6:33
SECRETARY OF STATE
TALLAHASSEE

DOCUMENT # P95000037091 (2)

1. Corporation Name
MARBLE KARE U.S.A. OF SOUTH FLORIDA, INC.

REINSTATEMENT 1996

Principal Place of Business
922 CLINT MOORE ROAD
BOCA RATON FL 33487

Mailing Address
922 CLINT MOORE ROAD
BOCA RATON FL 33487

3. Date Incorporated or Qualified: 05/08/1995
3a. Date of Last Report:

4. FEI Number: 65-0590818 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: ☐ Yes ☒ No

2. Principal Place of Business
21 Street, Apt. #, etc.
22 City & State
23 Zip / 24 Country / 25

2a. Mailing Address
26 Street, Apt. #, etc.
27 City & State
28 Zip / 29 Country / 30

9. Name and Address of Current Registered Agent
RESSLER, KEVIN
922 CLINT MOORE ROAD
BOCA RATON FL 33487

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE: [signature] DATE: 9/1/96
Signature, typed or printed name of the new registered agent and title if applicable (If OLD Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RESSLER, KEVIN 922 CLINT MOORE ROAD BOCA RATON FL 33487	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP		☐ Change ☐ Addition
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

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-10/17/96--01058--003
****375.00 ****375.00

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 9/1/96 561-997-2636
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CP