

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.

INCORPORATOR:

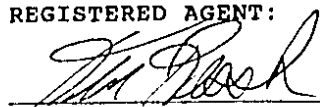

KEVIN RESSLER

FILED
JULY-8 PM 3:34
TALLAHASSEE, FLORIDA

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: \$275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFESSIONAL
CORPORATION
REINSTATEMENT
1996

FLORIDA DEPARTMENT OF STATE
Candice H. Mottman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000037091 (2)**

1. Corporation Name

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

FILED

96 OCT -9 PM 6:33

SECRETARY OF STATE
TALLAHASSEE

REINSTATEMENT 1996

3. Date incorporated or qualified **05/08/1986** 3a. Date of Last Report

4. FID Number **65-0590818** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.75 Additional Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under s. 190.032, Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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

2. Principal Place of Business 2a. Mailing Address

21. State, Apt. #, etc. 26. State, Apt. #, etc.

22. City & State 27. City & State

23. Zip 28. Zip 29. Country 30. Country

9. Name and Address of Current Registered Agent

**RESSLER, KEVIN
922 CLINT MOORE ROAD
BOCA RATON FL 33487**

81. Name

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

83.

84. City 85. Zip Code

11. Pursuant to the provisions of Sections 607.001, 607.002, 607.003, 607.004, 607.005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I, the undersigned, being duly authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with and agree to pay the requirements of Section 607.005, Florida Statutes.

SIGNATURE *[Signature]* (Print Name of Registered Agent and Title of Applicant) (Print Registered Agent Signature required when operating)

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

2. NAME **D RESSLER, KEVIN**

3. STREET ADDRESS **922 CLINT MOORE ROAD**

4. CITY - ST - ZIP **BOCA RATON FL 33487**

5. TITLE ☐ DELETE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE ☐ DELETE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE ☐ DELETE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE ☐ DELETE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP ☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

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

14. I do hereby certify that the information supplied with this report 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 of this statement and in the attachment's return address.

9/1/96 **561-997-2636**

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)