Date 7-5-95

व्यागम्य स्टान्ड, व्यवस्तान्त्रे स्टी १७७७५६ - स्ट्रायस -१११४ ****100,541 ****1,22,544 Secretary of State Division of Corporations P.O. Box 6327 Tallahassec, FL 32314 Re Type Way Graphics (name of corporation) Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$ 122.50 This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation. Very truly yours, (individual's name) (name of corporation) - MAILING ADDRESS OF CORPORATION -PHONE 3.5) 781-1648 Area Code Number

Gentlemen:

ARTICLES OF INCORPORATION

OF

TYPE WAY GRAPHICS, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

TYPE WAY GRAPHICS, INC.

The principal place of business of this corporation shall be

1677-8797-107-9994-1-104-27 Apt. F

3941 Copstal Luke 27 Apt. F

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,500 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the

and the name of the initial registered agent of the corporation at that address is MICHAEL HANKINS.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. PREEMPTIVE RIGHTS

Every shareholder upon the sale for cash of any new stock of this corporation of the same kind, class, or series as that which he already holds, shall have the right to purchase his pro rata share thereof at the price which it is offered to others.

ARTICLE VII. SPECIAL PROVISION

It is the intent of the incorporator that the corporation will qualify under Section 1244 of the Internal Revenue Code and that the corporation will file a Subchapter S corporation.

ARTICLE VIII. OFFICERS AND DIRECTORS

This corporation shall have ONE officer and ONE director, initially.

The name and street address of the initial officer and director who shall hold office for the first year of the corporation, or until his successor is elected or appointed are:

MICHAEL HANKINS
Dir/Pres./Secy/Treasury
3941 Crystal Lake Dr., # F
POMPANO BEACH, FLORIDA 33064

ARTICLE IX. SUBSCRIBERS

The name and street addresses of the subscriber to these Articles

of Incorporation is:

MICHAEL HANKINS
3941 Crystal Lake Dr., # F
POMPANO BEACH, FLORIDA 33064

IN WITNESS WHEREOF, the undersigned has hereto set his hand and

soal on this 544 day of July 1995.

The foregoing instrument was acknowledged before me this

5 th day of July, 1995, by Michael Hankins

Notary Public, State of 16 th at Large OPERIAL NOTARE STAL WILLIAM FORCETTON NOTARY FLORIDAL COMMISSION NO CONTROL MY COMMISSION NO CONTROL

My COMMISSION NO CONTROL

MY COMMISSION EXP. FUNE 6, 1985

STATE OF Florista

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:	
FIRST THAT THE LINE CORPORATION)	,
DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE	•
OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF	• .
STATE OF Florida HAS NAMED Michael Hankins . (STATE) (NAME OF REGISTERED AGENT)	
(STREET ADDRESS AND NUMBER OF BUILDING, POST OFFICE BOX ADDRESSES ARE NOT ACCEPTABLE)	
CITY OF Jongues , STATE OF FLORIDA, AS ITS AGENT	
TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.	
SIGNATURE Junity Howker TITLE President DATE 7-5-95	

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID CORPORATION.

SIGNATURE Profile Hander