1201 HASS STREET TAITAHASSEE EL 32301 901-222-9171

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MAME: CALECTABLE ASSET,

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XIIARTICLE, OF INCOMPORATION

CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CERTIFICATE OF COOD CTANDING

CONTACT PERSON: Raien B. Rozar

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#### ARTICLES OF INCORPORATION

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OF

# COLLECTABLE ASSETS, INCORPORATED

The undersigned subscriber (s) of these Articles of Incorporation, each natural person competent to contract, hereby associates themselves to form a corporation under the laws of the State of Florida.

#### **ARTICLE I - NAME**

The name of this corporation is: Collectable Assets, Incorporated

# **ARTICLE II - NATURE OF BUSINESS**

This corporation is organized for the purpose of allowing it to engage in any facet of business dealing with collectable items, and, in general, to carry on any other legal business whatsoever under the laws of the United States and the State of Florida.

# ARTICLE III - GENERAL STOCK

The maximum number of shares of stock that this corporation is authorize to have outstanding at any times is:

**NUMBER OF SHARES** 

PAR VALUE

100

\$1.00

# **ARTICLE IV - TERM OF DURATION**

This corporation shall have perpetual existence, commencing on the date of execution and acknowledgment of these Articles.

# ARTICLE V- CORPORATION'S ADDRESS

The initial address of the principal office of this corporation in the State of Florida shall be as follows 1320 So Dixie Highway, Suite 700, Coral Gables, Florida 33l46. The Board of Director (s) may from time to time move the principal office to any other address in the State of Florida and establish subsidiaries in any place within and without the United States.

#### ARTICLE VI - NUMBER OF DIRECTOR (s)

This corporation shall have two director initially. The number of director (s) may be increased or diminished from time to time by the laws adopted by the stockholder (s) but shall never be less than one (l)

## ARTICLE VII - INITIAL BOARD OF DIRECTOR (s)

The names and post office address (es) of the first Board of Director (s) who subject to the provisions of the Certificate of Incorporation, By-Laws and the corporation laws of the State of Florida, shall hold office for the first year of the corporations existence or until their successor (s) are elected and have qualified. These Director (s) and address (es) are:

NAME OF DIRECTOR (s)

ADDRESS (es)

Cassandra Grayson

1320 So. Dixie Highway, #700, Coral Gables, Fl

Eric Grayson

1320 So. Dixie Highway, #700, Coral Gables, Fl

#### ARTICLE VIII-INCORPORATOR

The name and address of the person(s) signing these Articles is Cassandra Grayson, 1320 So Dixie Highway, Coral Gables, Fl. 33l46

# ARTICLE IX - AMENDMENT

The Articles of Incorporation may be amended in the manner provided by the law. Every amendment shall be approved by the Board of Director (s) proposed by them to the stockholder (s) and approved at a stockholder (s) meeting by the majority of the stock entitled to vote thereon.

# ARTICLE X- DESIGNATION OF REGISTERED AGENT

The following person is hereby named as Registered Agent for this corporation to be its agent and to accept service of process within the State of Florida at the below registered address:

REGISTERED AGENT

**ADDRESS** 

Lewis G. Gordon, Esq.,

1320 So. Dixie Highway, #700

Coral Gables, FL 33134

# ACKNOWLEDGMENT OF REGISTERED AGENT

Having been named to accept service of process for the following corporation: Artistic Woods, Inc., at the place designated in these articles. I hereby accept to act in this capacity and agree to comply with the provisions of said act relative to keeping open said office.

LEWIS G. GÖRDON, ESQ.

REGISTERED AGENT

#### ARTICLE XI-BY LAWS

The power to adopt, alter, amend, or appeal by-laws shall be vested in the Board of Directors and the shareholders

## **ARTICLE XII - INDEMNIFICATION**

This corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by the law.

IN WITNESS WHEREOF, the undersigned subscriber has executed the Articles of Incorporation this 2 day of Aug., 1995.

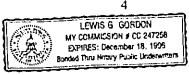
CASSANDRA GRAYSON

STATE OF FLORIDA ) COUNTY OF DADE )

I HEREBY CERTIFY, that on this day, before me, a notary public duly authorized to administer oaths and take acknowledgments personally appeared. Cassandra Grayson known to me to be the person described as subscriber in and who executed the foregoing Articles of Incorporation, who acknowledged before me that she subscribed to and executed the same, that I relied upon the following form of identification of the above-named person; Florida Drivers License and that an oath was taken.

Notary Public

My Commission Expires.



PLEASE READ ALL INSTRUCTION 'S BEFU	PLEASE READ ALL INSTRUCTION 'S BEFORE COMPLETING THIS FORMO	
APPLICATION PLONIDA DEPARTMENT	STATE CONTROL STATE	
FOR Sandra B. Mortham	(A)混合 [ ]	
REINISTATEMENT Secretary of State	1 it. i. i.	
DIVISION OF CORPORATIONS	00.000 0.00 0.00	
DOCUMENT # P950000 60394	96 DEC -2 PH 3: 53	
,	A CONTRACT OF STATE	
1 Corporation Name	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
COLLECTABLE ASSET , INCORPORATED	/ IALLAHASSEE, FLORIDA	
1		
Principal Place of Husiness FACA Ave  300 FACA Ave  Mailing Address  Mailing Address  THAM BERLI FCA 33139		
300 PALA Ave	70000000000000000000000000000000000000	
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MIAN, BEKIN FUN JUIUI	****375.00 ****375.00	
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If above addresses are incorrect in any way, line through incorrect information and enter correction be	DO NOT WRITE IN THIS SPACE	
2 New Principal Office Address, If Applicable 3 New Mailing AdJress, If Applicable	4 Date Incorporated or Qualified	
Suite, Apt #, etc Suite, Apt #, etc	To Do Business in Florida	
Suite, Apr. #, etc.	5 FEI Number Applied For	
City & State 71 m1 Box 11 FLD 3313 City & State	65-060 4152 Noi Applicable	
	6 SA75 Additional Fee required	
Zip Country Zip Country	CERTIFICATE OF STATUS DESIRED of Status Desired for a Certificate of Status	
7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must lis		
Name of Officers Street Address of	ol Each	
Title(s) and/or Directors Officer and/or D	Director City / State / Zip	
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B. Name and Accress of Current Registered Ageni	9. Name and Address of New Registered Agent	
ERIC ERMYSON  300 PALM AVE  TIMI BEACH FLA 33/39  City A	ERIC GRAYSON OF	
Street Add	ress (P O Box Number is Not Acceptable)	
300 PALM MU	300 PALIT DUC	
June Beach Fla 33/39 Suite Apr	• Etc	
MIMI DEALD + Ly JOIN	State Zip Code	
	71M1 BERN FLA State Zip Cope 7 /39	
10 I being appointed the registered agree of upo about named corporation, am familiar with and accept		
Prignature of	inde duligations of section out subject of	
Ingistered Agent ///	Date /0/7/21	
REGISTERED AGENT MUST SIGN	<u></u>	
11. Does this corporation pay any intangible tax to the	(See other side for information	
Dept. of Revenue under S. 199.032, Florida Statutes.	Yes No (See other side for information on intangible tax.)	
er sen i se range i in incidenti di serie di se		
12. I do hereby certify that the information supplied with this filing is countrily farmshed and does not	disably for the exemption stated in Section 119 07(3)(k), Florida Statut: Tre-	
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SIGNATURE: The Phys - ERIC 62 MSUN 10/7/96 305-673 3383