

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-224-3393 FAX

800-342-8086



P9500064032

ACCOUNT NO. : 072100000032
REFERENCE : 660921 8960A
AUTHORIZATION :
COST LIMIT : * 122.50

Patricia Poyko

ORDER DATE : August 16, 1995

ORDER TIME : 1:59 PM

ORDER NO. : 660921

300001588718

CUSTOMER NO: 8960A

CUSTOMER: Debbie Miller, Legal Assistant
EDWARD E. LEVINSON, P.A.

Financial Federal Bldg., ph-e
407 Lincoln Road
Miami Beach, FL 33139

DOMESTIC FILING

NAME: NEVCO TRADING, INC.

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Gail L. Shelby

EXAMINER'S INITIALS:

T. BROWN AUG 18 1995

FILED
95 AUG 17 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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95 AUG 17 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
NEVCO TRADING, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

NEVCO TRADING, INC.

The address of the principal office of this corporation shall be 1050 92nd Street, #4, Bay Harbor Islands, Florida 33154 and the mailing address of the corporation shall be the same.

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 1,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. 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 is:

Ronnie Adam	1050 92nd Street, #4
Dir./Pres./Sec./Treas.	Bay Harbor Islands, Florida 33154

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Service Company, has hereunto set their hand and seal of Corporation Service Company, on August 17, 1995.

CORPORATION SERVICE COMPANY

By: *Gail Shelby*
Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Service Company, a Florida corporation to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION SERVICE COMPANY

By: *Gail Shelby*
Its Agent, Gail Shelby

GLS/gls

1201 HAYS STREET
TALLAHASSEE, FL 32301
904 222 0171
904 222 0191 FAX

800-342-8086



P95000064032

ACCOUNT NO. : 00010000000000
REFERENCE : 00000000000000
AUTHORIZATION : *Debbie Miller*
CREDIT LIMIT : \$ 0.00

ORDER DATE : August 10, 1995

ORDER TIME : 1:40 PM

REC'D OCT 30 1995

ORDER NO. : 000001

CUSTOMER NO: 0060A

CUSTOMER: Debbie Miller, Legal Assistant
Edward E. Levinson, P.A.
Financial Federal Bldg., ph 00
407 Lincoln Road
Miami Beach, FL 33139

CHANGE OF AGENT

NAME: NEVCO TRADING, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 OCT 30 PM 4:12

FILED

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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 PLAIN STAMPED COPY

DATA FEE ON: AGENCY FEE

RAL
change
10/30/95
PC

Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: NEVCO TRADING, INC.

1b. Date of incorporation August 17, 1995 Document number 295000064032

2. The name and address of the current registered agent and office:

Corporation Service Company

1201 Hays Street, Tallahassee, FL 32301

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

Marc R. Levinson

407 Lincoln Road, PH-SE, Miami Beach, FL 33139

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Ronnie Adam
SIGNATURE

RONNIE ADAM, President

Typed or printed name and title

9/11/95

DATE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Marc R. Levinson

(Registered Agent)

DATE 9/25/95

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Form **8822**

(Rev. May 1992)
Department of the Treasury
Internal Revenue Service

Change of Address

▶ Please type or print.

OMB No. 1545-1163
Expires 5-31-95

▶ See instructions on back. ▶ Do not attach this form to your return.

Part I Complete This Part To Change Your Home Mailing Address

Check ALL boxes this change affects:

- 1 Individual income tax returns (Forms 1040, 1040A, 1040EZ, 1040NR, etc.)
▶ If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here
- 2 Employment tax returns for household employers (Forms 942, 940, and 940-EZ)
▶ Enter your employer identification number here _____
- 3 Gift, estate, or generation-skipping transfer tax returns (Forms 706, 709, etc.)
▶ For Forms 706 and 706NA, enter the decedent's name and social security number below.

▶ Social security number

a Your name (first name, initial, and last name) **P95000064032** Your social security number

b Spouse's name (first name, initial, and last name) _____ b) Spouse's social security number _____

6 Prior name(s). See instructions

7a Your old address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions Apt. no. _____

7b Spouse's old address, if different from line 7a (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions Apt. no. _____

8 New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions Apt. no. _____

Part II Complete This Part To Change Your Business Mailing Address or Business Location

Check ALL boxes this change affects:

- 9 Employment, excise, and other business returns (Forms 720, 941, 990, 1041, 1065, 1120, etc.)
- 10 Employee plan returns (Forms 5500, 5500 C/R, and 5500EZ)
- 11 Business location

12a Business name **NEVCO TRADING INC.** 12b Employer identification number **65 0602866**

13 Old address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions Room or suite no. **4**
1050 92ND ST. - BAY HARBOR ISLANDS, FL. 33154

14 New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions Room or suite no. _____
2411 NE 32 CT. LIGHT HOUSE POINT, FL. 33064

15 New business location (no., street, city or town, state, and ZIP code). If a foreign address, see instructions Room or suite no. _____

Part III Signature

Daytime telephone no. of person to contact (optional) ▶ _____

Please Sign Here

Your signature _____ Date **6/27/97**

Spouse's signature. If joint return, both should sign _____ Date _____

Title **Secretary**

If Part II completed, signature of owner, officer, or representative Date _____

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Cat. No. 12081V

Form **8822** (Rev. 5-92)

DOC # P95000064032