

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 Poyit

ORDER DATE : August 16, 1995

ORDER TIME : 1:59 PM

ORDER NO. : 660921

300001563713

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.

X ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

X 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

ARTICLES OF INCORPORATION
OF
NEVCO TRADING, INC.

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

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. : 0721000000017

REFERENCE : 00000000000000000000

AUTHORIZATION : *William P. Pizato*

POST LIMIT : 0.000000

ORDER DATE : AUGUST 10, 1995

ORDER TIME : 1:00 PM

RECEIVED 1995 OCT 30

ORDER NO. : 00000001

CUSTOMER NO: 000000

CUSTOMER: Debbie Miller, Legal Assistant
Edward E. Levinson, P.A.
Financial Federal Bldg., ph 0
407 Lincoln Road
Miami Beach, FL 33139

CHANGE OF AGENT

NAME: NEVCO TRADING, INC.

FILED
95 OCT 30 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

DATA 7 FEB 96: ARJL HENRIAL

271
hang
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

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
9/16/95
SIGNATURE
DATE

RONNIE ADAM, President

Typed or printed name and title

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 *M. Levinson*

DATE 9/16/95

(Registered Agent)

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

Change of Address

▶ Please type or print.

OMB No. 1545-1183
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.

a Your name (first name, initial, and last name)		▶ Social security number	
b Spouse's name (first name, initial, and last name)		Your social security number	
c 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	12b Employer identification number
NEVCO TRADING INC.	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.
1050 92ND ST. - BAY HARBOR ISLANDS, FL. 33154	4
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	Spouse's signature. If joint return, both should sign	Date
	6/27/97	Secretary	
If Part II completed, signature of owner, officer, or representative		Title	

DOC # P95000061032