

P95000066698

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service _____ Two Day Service _____

To us via _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fog \$ _____ Our \$ _____

*Called Sharon to change
 the CA name in Certificate to
 Designation from Howie to
 Howard*

SN AUG 29 1995

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY SKZ

WALK-IN Will Pick Up 8-29 2:00

RE DELAWARE
DIETZERS, INC

C.C. FEE. DISBURSED

- Capital Express™
- Art of Inc. File
- Corp. Record Search
- Ltd. Partnership File
- Foreign Corp. File
- () Cert. Copy(s)
- Art of Amend. File
- Dissolution/Withdrawal
- C U S-
- Fictitious Name File
- Name Reservation
- Annual Report/Reinstatement
- Reg. Agent Service
- Document Filing
- Corporate Kit
- Vehicle Search
- Driving Record
- Document Retrieval
- UCC 1 or 3 File
- UCC 11 Search
- UCC 11 Retrieval
- File No.'s _____ Copies _____
- Courier Service
- Shipping/Handling
- Phone () _____
- Top Priority
- Express Mail Prop.
- FAX () _____ pgs. _____

TALLAHASSEE, FLORIDA
 AUG 29 11:41 AM '95
 FILED

SUBTOTALS

| | | |
|--------------------------------|-----------|---------------|
| FEE..... | \$ | 95 |
| DISBURSED..... | \$ | 103.25 |
| SURCHARGE..... | \$ | |
| TAX on corporate supplies..... | \$ | 7.11 |
| SUBTOTAL | \$ | 205.36 |
| PREPAID..... | \$ | |
| BALANCE DUE..... | \$ | |

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum

THANK YOU
 from
 Your Capital Connection

ARTICLES OF INCORPORATION

OF

BLEAUSUAMPE BROTHERS, INC.

FILED
AUG 29 11:41
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **BLEAUSUAMPE BROTHERS, INC.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 9131 Pembroke Rd., Pembroke Pines, FL 33025.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of one dollar (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Howard Vogel, 9131 Pembroke Rd., Pembroke Pines, FL 33025.

ARTICLE V: INCORPORATOR

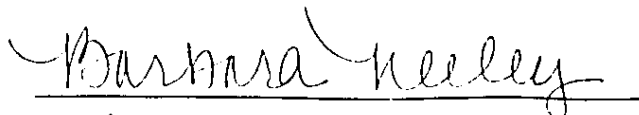
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is:

P/D Malvina Vogel 9225 NW 45 St., Sunrise, FL 33351
V/D Howard Vogel 9131 Pembroke Rd., Pembroke Pines, FL 33025
S/T Scott Vogel 9131 Pembroke Rd., Pembroke Pines, FL 33025

The undersigned has executed these Articles of Incorporation this 29th day of August, 1995.



Capital Connection, Inc.

Barbara Neeley - President

Incorporator

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: BLEAUSUAMPE BROTHERS, INC.

2. The name and street address of the registered agent and office is: HOWARD VOGEL 9131 Pembroke Rd
Pembroke Pines, Fla. 33025

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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Howard Vogel

FILED
AUG 29 10 41 AM '65
TALLAHASSEE, FLORIDA

FILED