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-095-16489

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ATTORNEYS AT LAW

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Please reply to:  
Key Largo office  
Homestead office

xxxx

August 8, 1995

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

RE: A & R ADVENTURES, INC.  
Articles of Incorporation

000001559820  
-08/14/95--01056--003  
\*\*\*\*122.50 \*\*\*\*122.50

Gentlemen:

Enclosed please find an original and one (1) copy of the Articles of Incorporation for the subject corporation and our trust account check in the amount of \$122.50. Said check represents the following fees:

Filing Fee	\$35.00
Resident Agent Designation	\$35.00
Certified Copy	\$52.50

Please return the certified copy to Sandra T. Lynn, Esq., Post Office Box 1692, Homestead, FL 33090.

If you should have any questions or require anything further in connection with this matter, please contact me at the number indicated above.

Very truly yours,

TURNER & LYNN

BY:

SANDRA T. LYNN

FILED  
95 AUG 29 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STL/sac  
Enclosures

REGISTER AUG 16 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

August 16, 1995

SANDRA T LYNN, ESQUIRE  
PO BOX 1629  
HOMESTEAD, FL 33090

SUBJECT: A & R ADVENTURES, INC.  
Ref. Number: W95000016489

We have received your document for A & R ADVENTURES, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6919.

Beth Register  
Corporate Specialist Supervisor

Letter Number: 395A00038380

ARTICLES OF INCORPORATION  
OF  
A & R ADVENTURES, INC.

FILED  
95 AUG 29 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following Articles of Incorporation:

ARTICLE I

The name of the corporation is: A & R ADVENTURES, INC.

ARTICLE II

The duration of the corporation is perpetual.

ARTICLE III

1. The purpose of the corporation shall be to transact any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act or engage in any other trade or business which can, in the opinion of the Board of Directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.

2. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

ARTICLE IV

CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is One Hundred (100). Such shares shall be of single class, have a par value of One and no/100's (\$1.00) per share.

ARTICLE V

REGISTERED OFFICE AND AGENT

The name and address of the initial registered agent and office of this corporation is Sandra T. Lynn, 830 N. Krome Avenue, Homestead, Florida 33030. The principal office is the same as the registered office.

ARTICLE VI

DIRECTORS

The number of directors constituting the initial Board of Directors of the corporation is two (2). The name and address of each person who is to serve as a member of the initial Board of Directors is:

Roslyne J. Fischer	346 N.W. 17th Street Homestead, FL 33030
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Andrew J. Fischer, II	346 N.W. 17th Street Homestead, FL 33030
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ARTICLE VII

The initial officers of this corporation shall be as follows:

Roslyne J. Fischer	President/Secretary
Andrew J. Fischer, II	Vice-President/Treasurer

ARTICLE VIII

INCORPORATORS

The name, address and amount of shares of each incorporator is:

Roslyne J. Fischer

346 N.W. 17th Street  
Homestead, FL 33030

Executed by the undersigned at Homestead, Florida on this 7th  
day of August, 1995.

Roslyne J. Fischer  
Roslyne J. Fischer, Incorporator

STATE OF FLORIDA

COUNTY OF DADE

I HEREBY CERTIFY, that on this day, before me, an officer  
duly authorized in the State aforesaid and in the County aforesaid  
to take acknowledgments, personally appeared Roslyne J. Fischer,  
Incorporator, who is personally known to me or has produced  
\_\_\_\_\_, as identification and is known to be the  
person described in and who executed the foregoing instrument and  
acknowledged before me that she executed the same.

WITNESS my hand and official seal in the County and State  
last aforesaid this 7th day of August, 1995.

Sandra T. Lynn  
Notary Signature

\_\_\_\_\_  
Printed Notary Name

My Commission Expires:



SANDRA T. LYNN  
MY COMMISSION # CC295624 EXPIRES  
July 18, 1997  
BONDED THRU TROY FAIR INSURANCE, INC.

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

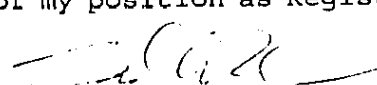
FILED  
95 AUG 29 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned 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 A & R ADVENTURES, INC.
2. The name and address of the Registered Agent and office is:

Sandra T. Lynn, Esq.  
830 No. Krome Avenue  
Homestead, FL 33030

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 do 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.

  
\_\_\_\_\_  
SANDRA T. LYNN, ESQ.

8-10-95  
\_\_\_\_\_  
Date