

95000069980

6

3:00 PM

((H95000010080)) PUBLIC ACCESS SYSTEM
 ELECTRONIC FILING COVER SHEET
 TO: DIVISION OF CORPORATIONS FROM: EMPIRE CORPORATE KIT COMPANY
 DEPARTMENT OF STATE 1492 W FLAGLER ST
 STATE OF FLORIDA SUITE 200
 409 EAST GAINES STREET MIAMI FL 33135-34
 TALLAHASSEE, FL 32399 CONTACT: RAY STORMONT
 PHONE: (305) 541-3694
 FAX: (904) 922-4000 FAX: (305) 541-3770

((H95000010080)) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
 NAME: NICOLA CLEANERS, CORP.
 FAX AUDIT NUMBER: H95000010000 CURRENT STATUS: REQUESTED
 DATE REQUESTED: 09/11/1995 TIME REQUESTED: 15:08:32
 CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0
 NUMBER OF PAGES: 4 METHOD OF DELIVERY: FAX
 ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 072450003255

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

((H95000010080))
 ** INVALID SELECTION...PLEASE RE-ENTER **
 ENTER SELECTION AND <CR>:
 Help F1 Option Menu F2

NUM CAPS Connect: 00:19:0

9-11-95
LB

95 SEP 11 AM 11:43
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DIVISION OF CORPORATIONS
 95 SEP 11 PM 5:24

H95000010080

**ARTICLE OF INCORPORATION
OF
NICOLA CLEANERS, CORP.**

55 SEP 11 11:11:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: NICOLA CLEANERS, CORP.

The principal place of business of this corporation shall be:
1900 E. 4 Th. Ave.
Hialeah, FL 33010

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 x \$ 10.00 = \$ 1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

HECTOR J. HALL
BASIC ACCOUNTING SERVICE
692 W. 29 Street # 9
Hialeah, Florida 33012
(305) 887. 4185

H95000010080

M9500010080

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

Nicola Magaletti 16766 NW. 67 Ave. Hialeah, FL. 33015	Director
Giuseppe Calabrese 1900 E. 4 Ave. Hialeah, FL. 33010	Director

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

Nicola Magaletti 16766 NW. 67 Ave. Hialeah, FL. 33015	President & Treasurer
Giuseppe Calabrese 1900 E. 4 Ave. Hialeah, FL. 33010	Secretary 10 shares

The undersigned has (have) executed these Article of Incorporation this 11 th. day of September, 1995.

X Nicola Magaletti
Signature/Title

[Signature]
Signature/Title

Signature/Title

M9500010080

H95060010080

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
SEP 11 11:11:43

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: _____
NICOLA CLEANERS, CORP.

2. The name and address of the registered agent and office is _____
GIUSEPPE CALABRESE
(Name)

1900 E. 4 Th. Ave.

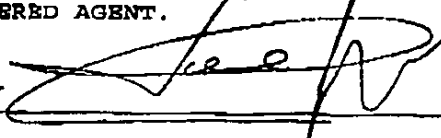
(P. O. BOX NOT ACCEPTABLE)

Hialeah, FL 33010

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE x



DATE

9-11-95

H95060010080