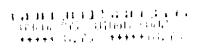
P9500070169

(Proposed corporate name - must include suffix)

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



Enclosed is an original and one (1) copy of the articles of incorporation and a check for: ~~] \$122.50 [] \$131.25 \$70.00 \$78.75 Filing Fee, Certified Copy & Certificate Filing Fee Filing Fee Filing Fee & Certified Copy & Certificate Additional Copy Required FROM: Name (printed or typed) MEDON ClearNATER City, State & Zip 513-524-0007 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION 95 SEP +8 171 9: 28

Total Charles Can

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

> ARTICLL I NAME

The name of the corporation shall be:

De In Va Consignment Furnature

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

16643 US 19 N CLEARWITTE IT 34624

> SHARES ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Brett Fisher 154: Mendow Dale Dr. Clearwater fl. 346.24

$\mathbf{ARTICLE}[\mathbf{V}] = \mathbf{INCORPORATOR}(\mathbf{S})$

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are).

Priet Fisher President / See 1843 User Medica Dide Di Cherk Maker G 306001 Vikki Coffish Via - President / Ties. 1843 Medica Dide De Cherk Maker ft 34604

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

day of _-luciust 19 (15)

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:	7 35
Depalu Consymment Fronting The (must include suffix)	-
2. The name and address of the registered agent and office is:	28 28
Brett Fishi (NAME)	
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
Clearwood fl. 34624 (CHY/STATE/ZIP)	

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.

(SIGNATURE)