## P95000 7/565 TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahasso L 32314

> e:mmnii:1543333336 -09712795--01171--001 -++++78,75 ++++78,75

SUBJECT:	SURFSEDE	Capital,	mc		
	(Proposed corporate name - must include suffix)				

Enclosion :	sed is an origina	I and one (1) co	py of the articles of	incorporation a	and a check
107	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	
FROM: ALBERT SNETS  Name (printed or typed)					
		Surfo	Address	3315y	SEP 12 MID: 41 SECATION OF STATE
}	)	Daytime	Telephone number	<u> </u>	RIFA

2119/15/95

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

FILED

## ARTICLES OF INCORPORATION

95 SEP 12 AH 10: 41

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

ARTICLE I NAME

The name of the corporation shall be:

SURFSIDE CAPITAL INC

ARTICLE II PRINCIPAL OFFICE

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

9456 Abbott ave Swiftide FL 33154

ARTICLE III SHARES

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

1000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Albert SNEIJ 9456 Abbott oure Surfu'de FL 33154

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Albert Sneig 9456 Abbott ave Swifnide I-C 33154

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

5 day of Sept 19 95

Click B Snew
Signature

Signature

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

## CERTIFICATE OF DESIGNATION OF FILED REGISTERED AGENT/REGISTERED OFFICE 95 SEP 12 AN 10: 41

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDAL CANADRES, 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:	Surfaide	capital inc					
		·						
2.	2. The name and address of the registered agent and office is:							
	Albert Sney (NAME)							
	9456	Abbott au	u_					
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)								
	Swyl	City/STATE/ZIP)	3154					
	(CITY/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.

MChert D. Signature) 9-5-95
(SIGNATURE) (DATE)