P 9600002933

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

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20876C1: Mag grab	inice, inc.	
(Propose	ed corporate name - must include suffix)	
Enclosed is an original and o	one (1) copy of the articles of incorporatio	n and a check
Filing Fee Filing	\$122.50 \$131.25 Ing Fee Filing Fee Filing Fee, & Certified Copy Certificate Additional Copy Required	
FROM: <u>5</u>	tephanie Luck	
<u></u>	Name (printed or typed) 161 S.E. 7th St. Address	
	Pompano Beach, Ft. 33060 City, State & Zip	
	(305) 489-7780 Daytime Telephone number	

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

ARTICLES OF INCORPORATION

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:

Med Grophics, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Mad Graphics, Inc. 505 NW 65th Ct. Suite 200 Fort Lauderdale, FL 33309

ARTICLE III SHARES

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

100,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Stephanie Luck 505 NW 65th Ct. Suite 200 Fort Lauderdale, FL 33309

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):

Stephenie Luck 161 S.E. 7th St. Pompeno Beech, FL 33060

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

<u> </u>	December	, 19 <u>95</u> .	
+	Alghan	in Luch	
$\overline{\mathcal{D}}$	- U	Signature	
		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 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:	Mad Graphics, Inc.	
	·		THE ST. LEWIS
2.	The name and address of the regist	ered agent and office is:	in the
	Str	nhania Luck (NAME)	
		S NW 65th Ct. Suite 200 (or Mail Drop Box <u>NOT</u> ACCEPTABLE)	_
	For	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.

+ Algrande Juch 12/30/95 (SIGNATURE) (DATE)