(Proposed corporate name - must include suffix)

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

		n roposed corporate	namo - must include suffix)	5009477700677 -02/05/9601122008 *****78.75 *****78.1	'55 75
Enclo	sed is an origina	of and one (1) co	ppy of the articles of incorp	oration and a check	
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	Filing Fee Filing & Certified Copy Certified	31.25 g Fee, ed Copy reficate red	
	FROM:	SQU (printed or typed)	2 NESURE	
		530	N DIXIC HWY	\	
		Bura	334 State & Zip	487 18/16	
		又 Daytime T	989-9333 elephone number	(NB)	,

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 1 Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE 1 NAME The name of the corporation shall be:

Croup Two Inc.

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

Boca Raion, FL 33487

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time 10,000

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

Sandra K. Zizzo
10144 Lexington Estates Blvd.
Boca Raton, FL 33428

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):

Sandra K. Zizza

10144 Lexington Estates Blvd.

Boca Raton, FL 33428

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

And Incorporation this

Signature

Signature

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

Signature

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:	Group Time	LAC
		Acc .o
2. The name and address of the reg	gistered agent and office is:	1247 1245 1245
Sand	In Grand Tizzo	-5 AT (4)
10144	30x or Mail Drop Box NOT ACCEPTABLE)	de Mil
Boea	ROLO FL 30	34/28

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.

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314