

Charter Number Only

P 960000 32102

4/9/96 Jody

Requester's Name
Frank Anigo
Address
1205 University Dr. #A
Plantation, FL 33324
City State ZIP Phone

VALIDATION ONLY

FILED
96 APR 12 PM 12:31
TALLAHASSEE, FLORIDA

600001775126
-04/10/96--01018--020
*****122.50 *****122.50

CORPORATION(S) NAME

SABRINA CORPORATION

- ☒ Profit
☐ NonProfit
☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☒ Certified Copy
☐ Call When Ready
☒ Walk In
- ☐ Amendment
☐ Dissolution
☐ Annual Report
☐ Reservation
☐ Photo Copies
☐ Call If Problem
☐ Will Wait
- ☐ Merger
☐ Mark
☐ Other
☐ Change of Registered Agent
☐ Certificate Under Seal
☐ After 4:30
☐ Mail Out

RECEIVED
96 APR 10 AM 11:09
SABRINA CORPORATION

~~96-7773~~

CERTIFIED COPY

F. CHESSER APR 12 1996

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

EMPIRE Toll Free: 1-800-432-3028



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 10, 1996

EMPIRE

TALLAHASSEE, FL 32301

SUBJECT: SABRINA CORPORATION
Ref. Number: W96000007773

We have received your document for SABRINA CORPORATION and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 196A00016494

FILED
96 APR 12 PM 12:31
TALLAHASSEE, FLORIDA

RECEIVED
96 APR 12 AM 10:17
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

OF

SARINA & ASSOCIATES, INC.

WE THE UNDERSIGNED, desiring to associate ourselves together for the purpose of forming a stock corporation, under the laws of the State of Florida, and pursuant to the provisions of the statutes of the State of Florida, providing for the formation, liabilities, rights and privileges and immunities of a corporation for profit, DO HEREBY as follows:

ARTICLE I

The name of this corporation shall be Sarina & Associates, Inc.

ARTICLE II
GENERAL NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III
COMMON SHARES

The amount of the authorized capital stock of the corporation shall be One Hundred (100) common shares at One Dollar (\$1.00) par value.

ARTICLE IV
AMOUNT OF CAPITAL TO BEGIN BUSINESS

The amount of capital with which this corporation shall commence shall be One Hundred Dollars (\$100.00).

ARTICLE V
CORPORATE EXISTENCE

This corporation shall have perpetual existence unless sooner dissolved according to law.

ARTICLE VI
PRINCIPAL PLACE OF BUSINESS

The initial street address of the principal place of business of this corporation shall be 4012 Del Rio Way, Sunrise, FL 33351.

ARTICLE VII
NUMBER OF DIRECTORS

The number of directors of this corporation shall be at least One (1).

ARTICLE VIII
NAMES OF DIRECTORS

The names and post office addresses of the first Board of Directors of this corporation who will hold office for the first year, or until successors are elected and have qualified, shall be:

Eileen Nadridge
4012 Del Rio Way
Sunrise, FL 33351

ARTICLE IX
OFFICERS

The names and post office addresses of the officers of this corporation who shall hold office for the first year or until their successors are elected or appointed and have qualified are:

Eileen Nadridge-- President, Vice President, Secretary,
Treasurer

ARTICLE X
REGISTERED AGENT

The office of 120 S. University Drive, Suite A, Plantation, Florida, is hereby designated as the registered office of this corporation and Frank Amigo of said address is hereby designated as registered agent of said corporation.

ARTICLE XI
INCORPORATOR

The names and post office addresses of each incorporator and number of shares of stock which each agrees to take are:

Frank Amigo, Esquire	100 shares
120 S. University Drive	
Suite A	
Plantation, FL 33324	



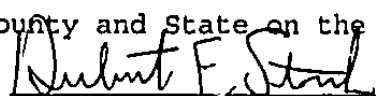
FRANK AMIGO

STATE OF FLORIDA

COUNTY OF BROWARD

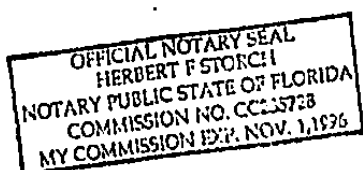
PERSONALLY appeared before me, the undersigned authority FRANK AMIGO, to me well known to be the person described in and who executed and subscribed to the same for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal in said County and State on the 9 day of Apr., 1976



NOTARY PUBLIC

MY COMMISSION EXPIRES:



ORIGINAL APPOINTMENT OF AGENT UPON WHOM

PROCESS MAY BE SERVED

KNOW ALL MEN BY THESE PRESENTS:

THAT FRANK AMIGO, in Broward County, a natural person and resident of the County, being the County in which the registered agent's office of Sarina & Associates, Inc. is located is hereby appointed as the person or whom process, tax notices and demands against Sarina Corporation, may be served.



FRANK AMIGO

STATE OF FLORIDA

COUNTY OF BROWARD

Gentlemen:

I hereby accept the appointment as the representative of Sarina Corporation, upon process, tax notices and demands may be served.



FRANK AMIGO

CERTIFICATE OF DESIGNATION
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: Sarina & Associates, Inc.
2. The name and address of the registered agent and office is:

FRANK AMIGO
(NAME)

120 S. UNIVERSITY DR., STE. A
(P.O. BOX NOT ACCEPTABLE)

PLANTATION, FL 33324
(CITY/STATE/ZIP)

SIGNATURE _____

TITLE _____

DATE _____

[Handwritten signature]
1700, Proctor
Apr 11 9, 1974

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE 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 _____

DATE _____

[Handwritten signature]
4/9/74

REGISTERED AGENT FILING FEE: \$35.00

FILED
96 APR 12 PM 12:31
TALLAHASSEE, FLORIDA
SECRETARY OF STATE