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| 890 S.W. 87 | AVENUE SUITE: 1 Address | 6 | | • |
| City/Stat | • | | Office Hee Oak | |
| | SENTATIVE TALLAHA | | Office Use Only | |
| | N NAME(S) & DOCUM | • | known): | |
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| Name Reservation | Limited Partnership | | | • " |
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APR 2 6 1996 SN

Examiner's Initials

ARTICLES OF INCORPORATION

OF

Fill Pity

BOB'S EQUIPMENT, INC.

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! NAME

The name of the corporation shall be:

BOB'S EQUIPMENT, INC.

ARTICLE IL PRINCIPAL OFFICE

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

807 SW 25 Ave Ste 200-A Miami,Fl 33135

ARTICLE III SHARES

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

1000 Shares (one dollar a share)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROBERTO DEL TORO 807 SW 25 Ave Ste 200-A Miami, Fl 33135

ARTICLE V INCORPORATORIS

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

ROBERTO DEL TORO (P) 807 SW 25 Ave Sto 200-A Miami, Fl 33135

| The undersigned | Incorporator(s) I | has(have) executed | these Articles of Incorporat | lion this |
|------------------------|-------------------|--------------------|------------------------------|-----------|
| 25 | day of | April | , 19 <u>96</u> . | |
| S | steets Def | EMSignature | , | |
| s s (2004) | | Signature | | |
| | | Signature | | |

CERTIFICATE OF DESIGNATION LIEGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 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: BOB'S EQUIPMENT, INC. | |
|------|---|---------------------------------------|
| 2. ' | The name and address of the registered agent and office is: | · · · · · · · · · · · · · · · · · · · |
| _ | ROBERTO DEL TORO | |
| _ | (NAME) 807 SW 25 Ave Ste 200-A | 14 to |
| | (P.Ö. BOX NOT ACCEPTABLE) | E=[0 =0 3] |
| | Miami, Florida 33135 | 1888 1980 1980 1980 |
| | (CITY/STATE/ZIP) | FLORID. |

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.

DATE April 25,1996

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| OPPICE USE ONLY (Document #) | | |
|--|---|---|
| Abe Fraden 6906 La Mesa Driv Jacksonville, Floride 3 | 2217 | 野野一年 |
| | OFFICE USE ONLY DOCUMENT NUMBER(S) (if known): | <u> </u> |
| (Corporation Name) | (Document #) | |
| (Corporation Name) | (Document #) | |
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| (Corporation Name) | (Document #} | |
| Walk in Pick up time Mail out Will wait | Photocopy Certificate | of Status |
| NEW FILINGS | AMENDMENTS | 000021764105 -05/13/9701052005 *****70.00 ******35.00 |
| Profit | Amendment | ************************************** |
| NonProfit | Resignation of R.A., Officer/Director | |
| Limited Liability | Change of Registered Agent | |
| Domestication | Dissolution/Withdrawal | |
| Other | Merger | |
| OTHER FILNGS | REGISTRATION/ QUALIFICATION | O/D resig. |
| Annual Report | Foreign | 12 |
| Fictitious Name | Limited Partnership | 140 |
| Name Reservation | Reinstatement | VS MAY 1 2 1997 |
| | Trademark | |
| | Other | |

Examiner's Initials

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 29, 1997

FROM

ABE FRADEN 6906 LA MESA DRIVE JACKSONVILLE, FL 32217

SUBJECT: CABLE EXPRESS SYSTEMS, INC.

Ref. Number: P95000036263

We have received your document for CABLE EXPRESS SYSTEMS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

To file a resignation as an officer or director with this office, the enclosed form should be completed and returned with a filing fee of \$35 per person resigning.

There is a balance due of \$70.00.

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 filling of your document, please call (904) 487-6909.

Velma Shepard Corporate Specialist

Letter Number: 997A00022262

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

1. RUTH FRADEN , hereby resign as Amount (Title)

of CABLE EXPRESS SYSTEMS, (No. (Name of Corporation))

a corporation organized under the laws of the State of FLORIPA

and affirm that the corporation has been notified in writing of the resignation.

(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

P95000036263

| CORPORATION NAME(S) & DOCUMENT NUMB 1. (Corporation Name) 2. (Corporation Name) 4. (Corporation Name) Walk in Pick up time | OFFICE USE ONLY CR(S) (if known): (Document #) (Document #) (Document #) (Document #) | S. O. |
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| Name Reservation Limited Partnership | | VB MAY 1 9 mm |
| Reinstatement | | MAY 1 2 1997 |
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| Other | _ | |

Florida Department of State, Sandra B. Morthani, Secretary of State

OFFICER / DIRECTOR RESIGNATION

| of CABLE EXPRESS SYSTEMS (Title) |
|--|
| of CABLE EXPRESS SYSTEMS INC. (Name of Corporation) |
| a corporation organized under the laws of the State of |
| and affirm that the corporation has been notified in writing of the resignation. |
| (Signature of resigning officer/director) |

FILING FEE IS \$35.00

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