

JUN-11-1996 17:15
6/11/96
(((H90000000188)))
TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000
EMPIRE CORPORATE KIT
FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM
SECURITY PRINT COVER SHEET
FROM: EMPIRE CORPORATE KIT COMPANY
192 W FLAGLER ST
SUITE 200
MIAMI FL 33135-
9-0000000
CONTACT: RAY STORMONT
PHONE: (305) 841-3694
FAX: (305) 841-3770
DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: K.S.B. CORP.
FAX AUDIT NUMBER: H90000008100
DATE REQUESTED: 06/11/1996
CERTIFIED COPIES: 1
NUMBER OF PAGES: 8
ESTIMATED CHARGE: \$122.50
CURRENT STATUS: REQUESTED
TIME REQUESTED: 10:56:10
CERTIFICATE OF STATUS: 0
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(((H960000008188)))
** ENTER 'M' FOR MENU. **
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Help F1 Option Menu F2

NUM OAPS Connect: 00:12:24

Handwritten: 16/17/96, NA, 10/16/96
FILED
96 JUN 14 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FL 32399
FILED
96 JUN 17 PM 3:35
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RECEIVED
96 JUN 12 AM 7:57
DIVISION OF CORPORATIONS

JUN-14-1996 13:37

EMPIRE CORPORATE KIT

P.00/13



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State

June 12, 1996

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: K.S.S. CORP.
REF: W96000012486

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

PLEASE COMPLETE THE NAME OF R.A. IN ARTICLE IV.

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) 487-6934.

Loria Poole
Corporate Specialist

FAX Aud. #: H96000008188
Letter Number: 996A00029246

JUN-14-1996 17:11 EMPIRE CORPORATE KIT
00/14/00 15:46 Fl. Dept. of State pl /1

P.01/26



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortherm
Secretary of State

June 14, 1996

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: KSHAD INC.
REF: W96000012486

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

You failed to make the correction(s) requested in our previous letter.

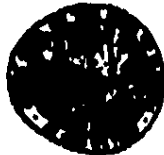
PLEASE COMPLETE THE NAME OF R.A. IN ARTICLE IV. !!!!!!!!!!!!!

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) 487-6934.

Loria Poole
Corporate Specialist

FAX Aud. #: E96000008188
Letter Number: 196A00029821



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State

June 17, 1996

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: KSEAD INC.
REF: W96000012486

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

You failed to make the correction(s) requested in our previous letter.

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) 487-6934.

Loria Poole
Corporate Specialist

FAX Aud. #: 296000008188
Letter Number: 296A00029908

JUN-17-1996 12:05

EMPIRE CORPORATE KIT

P.03/06

R.S.C. Collection Corp.
Rene Clavarezza
6965 SW 117 AVE
MIAMI, FL 33183
305-595-3020

ARTICLES OF INCORPORATION
OF
KSHAD INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of FLORIDA.

ARTICLE I NAME

The name of the corporation shall be:
KSHAD INC.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of FLORIDA, or any other state, county, territory or nation.

ARTICLE III CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV ADDRESS

The street address of the initial registered office of the corporation shall be:
6965 SW 117TH AVE.
MIAMI, FLORIDA 33183,
and the name of the initial Registered Agent for the corporation at that address is MOHAMMED S. SHAD

ARTICLE V SPECIAL PROVISIONS

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as may be necessary shall be deemed to have been taken by the appropriate officers to accomplish this compliance.

ARTICLE VI TERM OF EXISTENCE

This corporation shall exist perpetually.

ARTICLE VII LIMITATION OF LIABILITY

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his being or having been a director, stockholder or officer of the corporation or

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

ARTICLE VIII SELF DEALING

No contract or other transaction between the corporation and other corporations, in the absence of fraud, shall be affected or invalidated by the fact that any one or more of the directors of the corporation is or are interested in a contract or transaction, or are directors or officers of any other corporation, and any director or directors, individually or jointly, may be a party or parties to, or may be interested in such contract, act or transaction, or in any way connected with such person or person's firm or corporation, and each and every person who may become a director of the corporation is hereby relieved from any liability that might otherwise exist from this contracting with the corporation for the benefit of himself or any firm, association or corporation in which he may be in any way interested. Any director of the corporation may vote upon any transaction with the corporation without regard to the fact that he is also a director of such subsidiary or corporation.

This corporation shall have a minimum of, one director. The initial Board of Directors shall consist of:

MOHAMMED S. SHAD
SHAMIN SYED

ARTICLE IX INCORPORATOR

The name and address of the incorporator is:

MOHAMMED S. SHAD
6965 SW 117TH AVE.
MIAMI, FLORIDA 33183

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JUN-17-1996 12:06

EMPIRE CORPORATE KIT

P.05/06

IN WITNESS WHEREOF, the undersigned has hereunto set his hand
and seal on this 10TH day of JUNE, 1996.

Incorporator:

[Signature]

The foregoing instrument was executed and acknowledged before me
at Miami, County of Dade, State of Florida,
this 10th day of June, 1996 by Mohammad S. Shad
("Incorporator"), who is personally known to me ~~XXXXXXXXXXXXXXXXXXXX~~
~~XX~~ and who ~~did~~/did not take an
oath.

(SEAL)



[Signature]
Notary Public
State of _____
My Commission Expires: _____

196000008188

196000008188

DESIGNATION OF AND ACCEPTANCE
BY REGISTERED AGENT

The following is submitted in compliance with the laws of the State of FLORIDA. KSHAD INC., a corporation organizing under the laws of the State of FLORIDA, with its principal office located at:

6965 SW 117TH AVE.
MIAMI, FLORIDA 33183
MOHAMMED S. SHAD has named:
MOHAMMED S. SHAD
6965 SW 117TH AVE.
MIAMI, FLORIDA 33183

as its Agent to accept service of process within this State.

ACCEPTANCE:

I agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above designated address) in some conspicuous place in the office as required by law.

Registered Agent:

[Signature]

BEFORE ME, the undersigned authority, this day personally appeared

MOHAMMED S. SHAD ("Registered Agent"), at Miami

County of Dade, State of Florida, who is personally

known to me ~~XXXXXX shown XX~~

and who ~~did~~ did not take an oath and who, after being duly sworn, depos-

es and says that the facts and matters contained above are true and cor-

rect, and that he has executed the same for the purposes expressed here-

in.

WITNESS my hand and official seal this 10th day of June,
1996.

(SEAL)

Notary Public
State of _____
My Commission Expires: _____