

P9600056347

TRANSMITTAL LETTER

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

700001881877
-07/02/96--01118--015
****131.25 ****131.25

SUBJECT: ACCENT EMBROIDERY, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FILED
95 JUL -1 PM 12: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: JOSEPH STEPHEN JONES
Name (printed or typed)

5442 BAYTOWNE PLACE
Address

OVIEDO FL. 32765
City, State & Zip

(407) 366 0042
Daytime Telephone number

7/3/96
TB

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

ARTICLES OF INCORPORATION

95 JUL - 1 PM 2:26
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

ACCENT EMBROIDERY, INC.

ARTICLE II PRINCIPAL OFFICE

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

44 ALAFAYA WOODS BLVD NO. 161
OVIEDO FL. 32765

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSEPH STEPHEN JONES
5442 BAYTOWNE PLACE
OVIEDO FL 32765

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

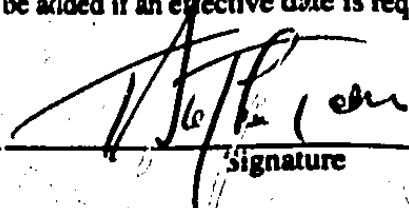
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JOSEPH STEPHEN JONES
5442 BATTOWNE PLACE
OVIEDO FL. 32765

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

_____ day of _____, 19 _____.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

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.

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
-1 PH12-26

1. The name of the corporation is:

ACCENT EMBROIDERY, INC.

2. The name and address of the registered agent and office is:

JOSEPH STEPHEN JONES
(NAME)

5442 BAYTOWNE PLACE

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

OWENSO FL 32765
(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.


(SIGNATURE)

29th JUNE 1996
(DATE)