P96000057710

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

000001807556
-07/03/96--01000--001
*****70.00 *****70.00

SUBJECT: I.M. FISHMAN, INC.
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of $ 70.00.

FROM: MARK S. KUHN
Name
5203 MECASLIN DR.
Address
NEW PORT RICHEY, FL. 34652
City, State, & Zip
(813) 842-2760
Telephone Number

FILED
95 JUL -8 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

OF

I. M. FISHMAN, INC.

FILED
98 FEB -8 PM 04
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:

I. M. FISHMAN, INC.

ARTICLE II PRINCIPAL OFFICE

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

5203 MECASLIN DR.
NEW PORT RICHEY, FL. 34652

ARTICLE III CAPITAL STOCK

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

1000 SHARES NON PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES ARNOLD
406 S. ARCTURAS
Clearwater, FL. 34625

X

ARTICLE V INCORPORATOR(S)

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

MARK S. KUHN
5203 MECASLIN DR.
NEW PORT RICHEY, FL. 34652

The undersigned has(have) executed these Articles of Incorporation this 2ND day of JULY, 1996.

X [signature] PRES
Signature/Title

Signature/Title

Signature/Title

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: I.M. FISHMAN, INC.

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

JAMES ARNOLD
(Name)

406 S. ARCTURAS AV.
(P.O. Box not acceptable)

CLEARWATER, FL. 34625
(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.

James A. Arnold
(Signature)

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