

P960000 59678

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-0070
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

of _____ No 53085
 RE: Omn. Distribution
Inc.

☒ Capital Express SM	_____	_____
☒ Art. of Inc. File	_____	_____
☐ Corp. Record Search	_____	_____
☐ Ltd. Partnership File	_____	_____
☐ Foreign Corp. File	_____	_____
☒ () Cert. Copy(n)	_____	_____
☐ Art. of Amend. File	_____	_____
☐ Dissolution/Withdrawal	_____	_____
☐ C U B	_____	_____
☐ Fictitious Name File	_____	_____
☐ Name Reservation	_____	_____
☐ Annual Report/Reinstatement	_____	_____
☐ Reg. Agent Service	_____	_____
☐ Document Filing	_____	_____
☐ Corporate Kit	_____	_____
☐ Vehicle Search	_____	_____
☐ Driving Record	_____	_____
☐ Document Retrieval	_____	_____
☐ UCC 1 or 3 File	_____	_____
☐ UCC 11 Search	_____	_____
☐ UCC 11 Retrieval	_____	_____
☐ File No.'s, Copies	_____	_____
☐ Courier Service	_____	_____
☐ Shipping/Landing	_____	_____
☐ Phone ()	_____	_____
☐ Top Priority	_____	_____
☐ Express Mail Prop.	_____	_____
☐ FAX () pgs.	_____	_____

SUBTOTALS

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on Corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

P. CHESSER JUL 17 1996

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	_____	_____	_____
TIME	_____	_____	CK No. _____
BY	_____	_____	_____

WALK-IN 7/17 12:00
 Will Pick Up

1

ARTICLES OF INCORPORATION

of

OMNI DISTRIBUTION, INC.

FILED
95 JUL 17 AM 11:04
TALLAHASSEE, FLORIDA

FIRST:

The name of the Corporation shall be OMNI DISTRIBUTION, INC. The principal mailing address of the corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

SECOND:

The purposes for which the corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

THIRD:

The corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

FOURTH:

Each shareholder of any class of stock of this corporation shall be entitled to full preemptive rights to purchase any unissued or treasury shares of the corporation.

FIFTH:

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

SIXTH:

The registered agent for the corporation shall be:

STANLEY A. GOLDSMITH
1605 Main Street, Suite 1001
Sarasota, Florida 34236

SEVENTH:

To the incorporator of OMNI DISTRIBUTION, INC.:

I understand my obligations as your Registered Agent and hereby accept appointment as your Registered Agent in accordance with F.S. 48.091.

7/16/96
Date

Stanley A. Goldsmith
Stanley A. Goldsmith

EIGHTH:

The Initial Board of Directors of the corporation shall consist of one (3) members:

L. Edward J. Zblegien, Jr.
501 Gulf Avenue
Bradenton, FL 34217

Jennifer J. Zblegien
228 E. Bailey
Naperville, IL 60565

Edna Testen
728 South Austin
Cicero, IL 60650

NINTH:

The Incorporator of OMNI DISTRIBUTION, INC., who by his signature hereby acknowledges the adoption of these Articles of Incorporation, is:


STANLEY A. GOLDSMITH
1605 Main Street
Suite 1001
Sarasota, Florida 34236

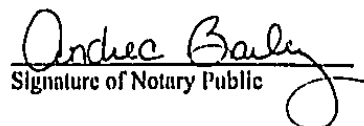
FILED
95 JUL 17 AM 11:05
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
COUNTY OF SARASOTA) ss:

The foregoing Articles of Incorporation of OMNI DISTRIBUTION, INC., were acknowledged before me this 16th day of July 1996, by STANLEY A. GOLDSMITH as registered agent. He is personally known to me or has produced N/A as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.



ANDREA BAILEY
My Commission CC298491
Expires Jul. 17, 1997
Bonded by ANB
800-852-5078


Signature of Notary Public

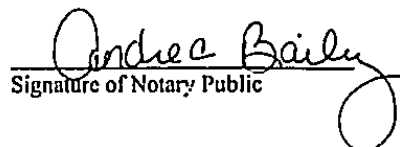
Print Name of Notary Public

I am a Notary Public of the State of _____, and my commission expires on _____.

The foregoing Articles of Incorporation of OMNI DISTRIBUTION, INC., were acknowledged before me this 16th day of July 1996, by STANLEY A. GOLDSMITH, as incorporator. He is personally known to me or has produced N/A as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.



ANDREA BAILEY
My Commission CC298491
Expires Jul. 17, 1997
Bonded by ANB
800-852-5878


Signature of Notary Public

Print Name of Notary Public

I am a Notary Public of the State of _____, and my commission expires on _____.