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July 16, 1996

VIA FEDERAL EXPRESS

Secretary of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32301

700001897027  
-07/17/96--01085--010  
\*\*\*\*122.50 \*\*\*\*122.50

**RE: SLP VENTURES, INC.**

Dear Sir or Madam:

Enclosed herewith please find an original and one copy of the Certificate of Incorporation for the above captioned corporation and a check in the amount of \$122.50 to cover the costs associated with same.

Once the enclosed is processed, kindly return one stamped copy to the undersigned in the enclosed envelope.

If you have any questions regarding the enclosed, please feel free to call. Thank you for your cooperation in this matter.

Very truly yours,

  
ANDREW R. FRIEDMAN

ARF/jc  
enc.

FILED  
96 JUL 17 AM 10:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
SLP VENTURES, INC.

FILED  
\$6 JUL 17 2006  
SECRET  
TALLAHASSEE  
STATE

I, the undersigned, being of legal age and natural person, do hereby subscribe to, acknowledge and file the following Articles of Incorporation for the purpose of creating a corporation under the laws of the State of Florida.

ARTICLE I

The name of the corporation shall be:

SLP VENTURES, INC.

ARTICLE II

This corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE III

The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows: 100,000 shares common stock, \$1.00 par value.

All of said stock shall be payable in cash, property, real or personal, labor or services in lieu of cash, at a just valuation to be fixed by the Board of Directors of this corporation. The payment thereof does not have to be at the time of issuance, provided that said shares are subject to calls thereon until the whole consideration therefor shall have been paid.

ARTICLE IV

The amount of capital with which this corporation shall commence business shall not be less than Five Hundred Dollars (\$500.00).

ARTICLE V

This corporation shall have perpetual existence, unless dissolved according to law.

ARTICLE VI

The principal office of the corporation shall be at: 4950 N.W. 110th Way, Coral Springs, FL 33076. Said corporation shall have full power and authority to transact business and to establish offices and agencies in such other places within and without the State of Florida and in any foreign countries. The name of the initial registered agent of this Corporation at the above address is: IRA COHEN.

ARTICLE VII

The business of the corporation shall be conducted by a Board of Directors of not less than one to be increased at the discretion of the Board of Directors.

ARTICLE VIII

The name and post office addresses of the first Directors of this corporation, all subject to the provisions of this certificate, By-laws, and the Corporation Law of the State of Florida, who shall hold office for the first year, or until their successors are duly elected and qualified are:

<u>NAME</u>	<u>ADDRESS</u>
IRA COHEN	4950 N.W. 110TH WAY CORAL SPRINGS, FL 33076

ARTICLE IX

The names and post office addresses of the officers of the corporation are as follows:

<u>NAME</u>	<u>ADDRESS</u>
IRA COHEN President/Secretary Treasurer	4950 N.W. 110TH WAY CORAL SPRINGS, FL 33076

ARTICLE X


The name and post office address of the subscriber to the Certificate of Incorporation is as follows:

<u>NAME</u>	<u>ADDRESS</u>
IRA COHEN	4950 N.W. 110TH WAY CORAL SPRINGS, FL 33076

ARTICLE XI

The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors and the Shareholders.

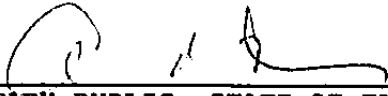
IN WITNESS WHEREOF, the undersigned incorporator, being the same person named in Article X above, and in evidence of his desire to form this Corporation does hereunto subscribe his name, this 16 day of July, 1996.

  
\_\_\_\_\_  
Subscriber - Ira Cohen

STATE OF FLORIDA                    )  
  ) SS.:  
COUNTY OF Polk County        )

BEFORE ME, the undersigned authority, personally appeared  
IRA COHEN, the person described in and whose name is signed to the  
foregoing Certificate of Incorporation of SLP VENTURES, INC., and  
who is described in said Certificate as the incorporator of said  
corporation, and he acknowledged before me that he executed the  
same for the purposes herein expressed.

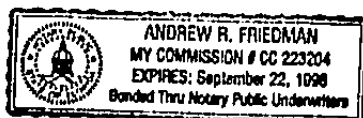
WITNESS my hand and seal in the County of Polk County,  
State of Florida, this 16 day of July, 1996.

  
\_\_\_\_\_  
NOTARY PUBLIC, STATE OF FLORIDA  
Printed Name:

Personally known ☒ OR  
Produced Identification ☐

Type of identification \_\_\_\_\_

My Commission Expires:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING  
IS SUBMITTED:

FIRST - THAT SLP VENTURES, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF  
FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF CORAL  
SPRINGS, STATE OF FLORIDA, HAS NAMED IRA COHEN LOCATED AT 4950 N.W.  
110TH WAY, CITY OF CORAL SPRINGS, STATE OF FLORIDA, (33076) AS ITS  
AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

*Ira Cohen*  
(Sole Incorporator)

TITLE: President

DATE: July 16, 1996

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I  
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY  
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND  
COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

*Ira Cohen*  
(Registered Agent)

DATE: July 16, 1996

FILED  
96 JUL 17 11:10:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA