P96000062249

TRANSMITTAL LETTER

96 JUL 23 AH 11: 58

TALLAHASSEE, FLORIDA

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

SUBJECT:	Hotic Ince (Proposed corporate	name - must include su	uffix) :::[□][□] □[17/23 ++++	/96011120U5
Enclosed is an origina for : \$70.00 Filing Fee	al and one (1) cop \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	incorporation and a \$131.25 Filing Fee, Certified Copy & Certificate	check
FROM		R COULER Offinted or typed) RIERTA COULE	T	
		Address OTE Spring Ity, State & Zip OlioD: U373	FI: 39701	

PH125/96

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

Daytime Telephone number

ARTICLES OF INCORPORATION JUL 23 ARTH: 58

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 | NAME

The name of the corporation shall be:

Arristic Concepts Inc.

ARTICLE II PRINCIPAL OFFICE

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

PO BOX 941990 MAITHAND, F1: 32794-1990

ARTICLE III SHARES

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

One thousand (1,000) of \$1.00 par value common shock.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Julie R. Collier 517 Rierth Court Allempote Springs, Fl: 32701

ARTICLE V INCORPORATOR(S)

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

Julie R. Callier BIT PLERTA COURT Albamponhe Springs, Fl. 32701

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF 96 JUL 23 MILL 58 REGISTERED AGENT/REGISTERED GARIGE TALLAMASSEE, FLORIDA

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: ARTISTIC CORROLS, TOC.
2.	The name and address of the registered agent and office is:
	(Name) 50 RIFFTA DOT (P.O. Box not acceptable)
	Allmonie Spinco Fl: 32001 (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) (Date)

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April 18, 1997

Re: Artistic Concepts, Inc. EIR # 59-3397118

To whom it may concern,

1. Effective immediately please change the address for the above mentioned corporation to the following.
Artistic Concepts, Inc.
517 Puerta Court
Altamonte Springs, F1: 32701

This address is for both the registered agent and the actual corporate mailing address.

Thank you in advance for your prompt attention in this matter.

Sincerely

Julie R. Collier

407-260-6373 517 Puerta Court

Altamonte Springs, Fl: 32701

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