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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 8327
Tallahassee, FL 32314

100001912061
-08/02/96--01091--020
*****78.75 *****78.75

SUBJECT: Magic Touch Polishing Systems, 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

FROM: Hector Rivera
Name (printed or typed)
4220 SW 21st Street
Address
Fort Lauderdale, FL 33317
City, State & Zip
954-587-7656
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 AUG -2 PM 1:49

FILED

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

8.5.96
UR

ARTICLES OF INCORPORATION

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.

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TALLAHASSEE STATE
RECORDS & ADMINISTRATION
FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Magic Touch Polishing Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

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

235 Goolsby Blvd.
Deerfield Beach, FL 33442

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:

Diego Cardozo
3672 East Citrus Trace
Davie, FL 33326

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):

Hector Rivera
4220 SW 21st Street
Fort Lauderdale, FL 33317

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

29 day of July, 1996.

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

Hector Rivera

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.

1. The name of the corporation is: Magic Touch Polishing Systems, Inc.
2. The name and address of the registered agent and office is:

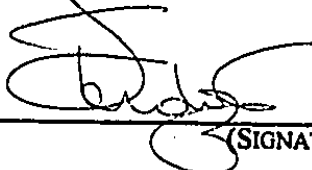
Diego Cardozo
(NAME)

3672 East Citrus Trace
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Davie, FL 33325
(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

7/29/96
(DATE)