

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 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 _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

RE: Beethoven Vorditor

	C.O. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> () Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S.		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ()		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () pgs.		
SUBTOTALS _____		

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

WALK-IN Will Pick Up 9/13 12:00
APK 9/13

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

SEP 13 11:10:20
 TALLAHASSEE, FLORIDA

RECEIVED
 95 SEP 13 11:54:45
 OFFICE OF COMMERCE

FILED
96 SEP 13 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

ARTICLE I NAME

The name of the corporation shall be:

BEETHOVEN KONDIKTOREI, INC.

ARTICLE II PRINCIPAL OFFICE

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

**10720 S.W. 113 PLACE
MIAMI, FL 33176**

ARTICLE III SHARES

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

1,000 (ONE THOUSAND)

ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is:

**KATHLEEN KOCH
10720 S.W. 113 PLACE
MIAMI, FL 33176**

ARTICLE V INCORPORATORS

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

KATHLEEN KOCH
10720 S.W. 113 PLACE
MIAMI, FL 33176

RICHARD P. BERNARD
300 SEVILLA AVE, SUITE 311
CORAL GABLES, FL 33134

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 11th day of SEPTEMBER, 1996.



Signature KATHLEEN KOCH



Signature RICHARD P. BERNARD

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

FILED
96 SEP 13 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: BEETHOVEN KONDITIONER, INC.
2. The name and address of the registered agent and office is:

KATHLEEN KOCH

Name

10720 S.W. 113 PLACE

(P.O. Box or Mail Drop NOT Acceptable)

MIAMI, FLORIDA 33176

(City, State, ZIP Code)

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 obligation of my position as registered agent.

Kathleen Koch
(Signature) KATHLEEN KOCH

9/11/96
(Date)