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TRANSMITTAL LETTER CONTROL AND TO SEE

Walten Chilly

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

| SUBJECT: AERIE | E INVES | MENTS, I | -NC· |
|------------------------------|--|--------------------------------------|--|
| | | | ©©©©©©1:944:92 -09/16/96010650 *****78.75 *****7 |
| Enclosed is an original | and one (1) cop | y of the articles of i | 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 |
| FROM: | MicHE | E JACOB | Sel) |
| | 5/00 1 | V·W. 33 AVE | = #250 |
| | Ft. Lau | DRDALE, F ty, State & Zip | FL. 33309 |

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

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ARTICLES OF INCORPORATION MALLA CRIUN

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:

AERIE INVESTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

5100 N.W. 33 AVE. - Suite #250

Ff. Lander Dale, Fh. 33309

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michele JACOBSEN

AFRIE INVESTMENTS, INC. 5700 N.W. 33 AVE. - Suite #250

Ft. LAWDERDALE, FL. 33309

ARTICLE V INCORPORATOR(S)

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

MicHELE JACOBSON
AERIE INVOSTMENTS, INC.
5700 N.W. 33 AVENUE - Suite \$500
Ft. LANDORDALE, Fl. 33309

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

10th day of September 1976.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

AERIE INVESTMENTS, INC.

LIST OF OFFICERS:

- * Michele Jacobsen-President
- * John Raburn- Vice-President
- * Erik Jacobsen-Vice-President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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.

| 2. The name and address of the registered agent and office is: | | | |
|--|--|--|--|
| Michele JACOBSON | | | |
| (Name) | | | |
| 5/00 N.W. 33 Avenue - Suite #250 | | | |
| (P.O. Box not acceptable) | | | |
| Ft. LAWGEDALE, FL. 33309 | | | |
| (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) /

1. The name of the corporation is:____

(Date)

NUESTIVE



6-12-97

As of this Date our New physical address is: 3200 N.E. 14+4 Street Causeway.

Pomparo Beach, FL. 33062. [Mailing) Abbress:

P.B. Box 3275, Pomparo Beach, FL. 33072-3275.

HANKyon,

Michelyscohon Register

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