PAGOCO 82082 FILED 96 SEP 30 AM 9: 52 SEURETARY OF STATE

SEURETARY OF STATE TALLAHASSEE. FLORIDA

9/26/96

Please vote that I reserved the NAMES

STAPPINTS + HANDS OF FAME, INC. R96000004395 R96000004397

100001960271 -10/01/96--01021--017 *****78.75 *****78.75

TAM NOW INCORPORATING.

The NAME - STAPPINTS - HANDS OF FAME, INC.

Anthony A Grier 550/N. Reo ST #300

TAMPA, FL 33609

Thank you futty to Lin

D4196

ARTICLES OF INCORPORATION

FILED

96 SEP 30 AM 9: 52

SECRETARY OF STATE
The undersigned incorporator(s), for the purpose of forming a corporation under the Phornal DESTRESS EQRIDA
Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

STAPPINTS. HANDS OF FAME, FAC.

ARTICLE II PRINCIPAL OFFICE

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

550 N. Reo ST. #300 TAMPA, FL 33609

ARTICLE III SHARES

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

1,000 shares AT 41.00 A Share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANthony A. Grier 550 N. Reo ST. #300 TAMPA, FL 33609

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):

Anthony A. Grier 550 N. Rec ST. II 300 TAMPA, FL 33609

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

26 day of SettenBer, 19 96.

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

Atty A. Live 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:	STACRINTS - HANDS OF	FAME	, I	<u>-</u> 20
2. The name and address of the registered agent and office is:				
ANthony A. Grier (NAME)		ECRETA LEAHASI	96 SEP 30	
(P.O. Bo	N, Red ST. #300 x or Mail Drop Box NOT ACCEPTABLE)	BEE. FLO) AM 9:	
TAMPA	// 33609 (CITY/STATE/ZIP)	AUDA	: 52	

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.

Arthy A. Thier 9/26/96 (DATE)