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

SUBJECT: EURO - IMPORTS (Proposed corporate name - must include suffix)

> 700001965467 -10/04/96--01079--013 . 25

= \$70.00 Filing Fee	#78.75 Filing Fee & Certificate	#122.50 Filing Fee & Certified Copy Additional Copy R	\$131.25 Filing Fee, Certified Copy & Certificate equired		
. FROM:	LISA	CANADA		SECR TALLA	Poly
	Nam	e (printed or typed)		OCT -4 CRETARY LAHASSI	Partie
	1270 a	JELSON RD. Address)
	ORLAND		57	STATE STATE	7-80 t
		45- 4507			
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NOTE: Please provide the original and one copy of the articles.

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:

EURO-IMPORTS, INCORPORATED

96 OCT -4 PH S: 51
SECRETARY OF STATE
TALLAHASSEE FLORION

ARTICLE II PRINCIPAL OFFICE

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

1270 CUELSON RD. ORCANDO, FL 32837

ARTICLE III SHARES

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

The name and address of the initial registered agent is:

1270 WELSON RD. ORCANDO, FL 32837

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):

MARCO DE SANTIS'
ROSANNA DE SANTIS
FRANK V. CANADA
LISA V. CANADA

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

15-tday of October , 19 90

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

Signature

Signature

U. Caso Q.
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:	EURO-	HYPORTS,	INCORPO	RA TE
2. The name and ac	dress of the regist	ered agent and of	ffice is:		
	LISA	V. CAN	IA DYA		
	1270 W	or Mail Drop Box 1		96 OCT -	*-EXECUTE
	·	D) FC	 3a837	4 PH	
•		(CITY/STATE/	(P)	5: 51	Jane Jane

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.

Genala September 30, 1994 (SIGNATURE) (DATE)

MARCO DE SATILIA DO DO SONO DE SATILIA DE SONO MARCO DE SATILIA DE SONO MARCO DE SATILIA DE SONO DE SATILIA DE SATILI

TO WHO MAY IT CONCERNE:

THIS IS A LETTER TO INFORME THE DEPARTMENT THAT

THE CURRENT MAILING ADDRESS AND THE WANE OF THE OFFICER

ACENT RESPONSABLE FOR "EURO- INFORTERS INCORPORATED" AS BEEN

CHANGED FRONTHE OLDER ADDRESS:

Lish CAKNOA
12 to WELSON RO
OPLANDO TO 32837
TIL 407 - 345-4507

Wist

IN A KEW MAILING ADDRESS AND NEW OFFICER AGENT THAT WOULD BE:

MARCO DE SANTIS
1304 WELSON RD
ORLANDO, FL 3837
Tel (401) 857-4003 (500)

Tel (401) 857-4003 (DAY Time Tal. WHOSER)

MARCO DE SANTIS

LISA CALADA

EYE WITHESS

Sincentry Appreciate

THANK YOU.

Marco De South

Rosanna Re Santi

0083377 De Santez, Marco 000001989040--9 -10/29/96--01120--004 *****35.00 *****35.00 City 1304 Welson M Orlando 7132537 Office Use Only CORPORATION MANUELL, L. JUMENT NUMBER(S), (if known); 1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) 3. (Corporation Name) (L'osument #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Photocopy ☐ Will wait Mail out Certificate of Status AMENDMENTS NEWTUNGS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent **Domestication** Dissolution/Withdrawal Other Merger OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership VS NOV 1 1996 Name Reservation Reinstatement Trademark Other

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation is: EUCO - IMPORTS INC
2. The mailing address of the corporation is: 1270 WECSON RD PROPERTY ORCANDO FR 33837
3. Date of incorporation/qualification: 10/4/96 Document number: P9400003358 4. The name and address of the current registered agent and office:
LISA CANADA
1270 WELSON RD
ORLANDO, FL 32837
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
MARCO DE SANTIS
1304 WELSON RD
ORIANDO, 15C 321837
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
Signature of an officer, chairman or vice chairman of the board) (Dafe)
Rosanna De Santis (Printed or typed name and title)
daving been named as registered agent and to accept service of process for the above stated corporation, hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to omply with the provisions of all statutes relative to the proper and complete performance of my auties, and I am familiar with and accept the obligation of my position as registered agent.
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

FILING FEE: \$35.00

CR2E045(1/95)