BOOMERWEAR ENTEPRISES, INC.

Boomerwear Enterprises /NE.

(Proposed corporate name - must include suffix)

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

400001971874 -10/11/96--01081--011 ****122.50

\$70.00	\$78.75 Filing Fee & Certificate	Filing Five & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required		
FROM:	Sheci Name (PNN COWA printed or typed)	√	WLLYHJ SEOSEI 130 0CI	==
		Address D	33026	THE BH	प्रकार इ.स.
n	City	432-9118	33086	3: 58 STATE ORIDA	Soes

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.

The name of the corporation shall be:

BOOMERWEAR ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

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

11400 WAYNE DRIVE, COOPER CITY, FLA - 33026.

ARTICLE III SHARES

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

100 shares_

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

TRA R. GORDÓN, ESA. CloWAITMAN and GURDON 3929 Ponce de Leon Blud. Coral gables Fla 33134

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):

SHER! ANN COWN 11400 WAGNE DRIVE-COUPER CITY, FLA 33026 BROOKE COWAN 11400 WAYNE DRIVE"
COOPER CITY Fla 33076

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

1 day of October., 19 96 -

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

Signature Course

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, FLCRIDA 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. Ti	he name of the corporation is:	BOOMER	VEAR	ENTERP	RISES	/N C
2. Th	ne name and address of the regist	tered agent and offic	e is:			
	IRA R	, GORSON	/			
	3929 Por	Ce de L'ET	N BI	vd.		95 96 1111
	Circal	gables	FLQ	33/34	Nasski Virky Si	Carriero
		(CITY/STATE/ZIP)		<u> </u>	LORIE S. 2. 2	Trum

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.

(S. JNATURE)

(DATE)