PONIPANO BEAGE PLORIDA FIGORIA DE

TELEPHONE (084) 043 8210 FAX (084) 781 8888

DANDE I GLANDO DINDRE L TTOJANA

October 28, 1996

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

000001990750--9 -10/30/96--01032--006 ******70.00 ******70.00

Re: DANCEFLOOR SYNDROMA, INC.

Dear Sir:

Enclosed please find the original Articles of the above proposed corporation together with my check in the amount of \$70.00 to cover the following:

Filing Fee \$35.00 Registered Agent Designation 35.00

Total \$70.00

Please let me know the corporation number after same is filed?

Thank you for your assistance in this matter.

Sincerely yours,

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1001 3 1 1996. BSB

AH 9:

Charlotte J. Burrie

CJB:cb Encs.

FILED

ARTICLES OF INCORPORATION OF

96 OCT 30 NH 9: 41

DANCEFLOOR SYNDROMA. INC.

TALLAHASSET, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be: DANCEFLOOR SYNDROMA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1160 Mulberry Way, Boca Raton, FL 33486

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Kimberlee Edwards
1160 Mulberry Way
Boca Raton, FL 33486

ARTICLE V INCORPORATOR(S)

The name and street address of the incorporator to these Articles of Incorporation is:

Kimberlee Edwards 1160 Mulberry Way Boca Raton, FL 33486

The undersigned has executed these Articles of Incorporation this 24th day of October, 1996.

Kimberlee Edwards (Incorporator

CERTIFICATE OF DESIGNATION 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.

- The name of the corporation is: DANCEFLOOR SYNDROMA, INC.
- The name and address of the registered agent and office is:

Name: Kimberlee Edwards

> 1160 Mulborry Way Boca Raton, FL 33486

> > Kimberlee Edwards

Title: Incorporator

Date: October 24, 199

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE 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 AGENTY.

> Kimberlee Edwards, Incorporator October 24, 1996