

P96000093317

Julie Jeffcoat

Requestor's Name

21770 North First Street

Address

Pembroke Pines, FL 33029

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Classic Creations, Inc.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

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-11/13/96--01073--014

4.

(Corporation Name)

(Document #)

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☐ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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96 NOV 12 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 14 1996

ARTICLES OF INCORPORATION

OF

CLASSIC CREATIONS, INC.

FILED

96 NOV 12 PM 1:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CLASSIC CREATIONS, INC.

The principal place of business of this corporation shall be:

233 N FEDERAL HIGHWAY SUITE 47
DANIA, FLORIDA 33004

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 SHARES, \$1 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

JULIE JEFFCOAT PRESIDENT
21770 NORTH FIRST STREET
PEMBROKE PINES, FLORIDA

33029

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these articles of incorporation is(are):

JULIE JEFFCOAT
21770 NORTH FIRST STREET
PEMBROKE PINES, FLORIDA
33029

IN WITNESS WHEREOF, the undersigned incorporator(s) has have executed these Articles of Incorporation this 5 day of NOVEMBER, 19 96.

Signature(s) of Incorporator(s)

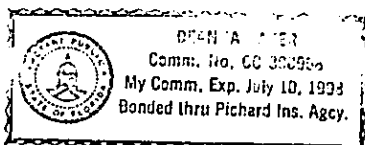
Julie Jeffcoat

STATE OF FLORIDA
COUNTY OF BROWARD

THE FOREGOING instrument was acknowledged and sworn to before me this 5 day of NOVEMBER, 19 96, by Julie Jeffcoat
(Name of Incorporator)

of CLASSIC CREATIONS, INC.

(Name of Corporation)



Debra A. Baker
Notary Public

(SEAL)

My Commission Expires: 7/10/1998

**CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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: CLASSIC CREATIONS, INC.

2. The name and address of the registered agent and office is:

PHILIP L GLICKMAN CPA
BOX JVES DAIRY ROAD 6103
(P. O. BOX NOT ACCEPTABLE)
NORTH MIAMI BEACH, FLORIDA 33179
(CITY/STATE/ZIP)

SIGNATURE Julie H. Brown
(Corporate Officer)

TITLE President

DATE 11/05/96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 507.325 FLORIDA STATUTES.

SIGNATURE Philip L. Glickman CPA
(Registered Agent)

DATE 11/05/96

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NOV 12 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA