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		Office Use Only
CORPORATION	NAME(S) & DOCUMENT NUM	BER(S), (if known):
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NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Directo	or .
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS	REGISTRATION/	7/ 11
Annual Report	QUALIFICATION	1/2/31
Fictitious Name	Foreign	aU I' oV
Name Reservation	Limited Partnership Reinstatement	1 10
	Trademark	J 2593 27 10/23/16
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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

Octob er 23, 1996

PETER A. CALVO 2919 NW 5 AVE WILTON MANORS, FL 33311

SUBJECT: CALVO ENTERPRISES INC. Ref. Number: W96000022593

We have received your document for CALVO ENTERPRISES INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Pamela Hall Document Specialist

Letter Number: 196A00048996

ARTICLES OF INCORPORATION

OF

CALVO ENTERPRISES INC.

96 NOV 18 PILI2: 12

ARTICLE I - NAME

The name of the Corporation is CALVO ENTERPRISES INC.

ARTICLE II - DURATION

The Corporation shall have a perpetual existence.

ARTICLE III - PURPOSE

The purpose of this Corporation is to engage in any activities or business permitted under the laws of the United States and Florida.

ARTICLE IV - CAPITAL STOCK

The maximum number of shares which this Corporation is authorized to have at any time is 500 shares of common stock having a par value of \$1.00 per share.

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The initial registered office of this Corporation shall be 2919 N.W. 5 AVENUE WILTON MANORS, FL 33311

Registered Agent at this office shall be Mr. PETER A. CALVO, who upon accepting this designation agrees to comply with the provisions of S48.091, Florida Statutes, as amended from time to time, with respect to keeping an office open for service of process.

Cles, THE PRINCIPAL ADDRESS AND THE REGISTERAD OFFICE ADDRESS ARZ THE SAME. Putalleling 10/29/96

ARPICLE VI - INITIAL BOARD OF DIRECTORS

The initial Board of Directors shall "snaist of one ,")
member. The number of directors shall be fixed by the Bylaws
and may be changed from time to time. The names and addresses of
the Directors consisting the initial Board of Directors are:

NAMES

ADDRESSES

PETER A. CALVO

2919 N.W. 5 AVENUE WILTON MANORS, FL 33311

ARTICLE VII - INCORPORATOR

The name and street address of the person signing these Articles of Incorporation is:

NAME

ADDRESS

PETER A. CALVO

2919 N.W. D AVENUE WILTON MANORS, FL 33311

PETER A. CALVO

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing Articles of Incorporation of CALVO ENTERPRISES INC.

were acknowledged before me this 14 day of OCTOBER

1956. by PETER A. CALVO, as Incorporator.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my

official seal in the State and County aforesaid, this 14 day of OCTOBER , 1996.

OFFICIAL NOTARY SEAL JOSEPH J ROBINSON NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC519354 MY COMMISSION EXP. AFR. 29,2000 NOTARE PUBLIC

ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process for

Inc., at the place designated in the Articles of Incorporation, PETER A. CALVOagrees to act in this capacity and agrees to comply with provision of S48.091, relative to keeping open such office.

DATED: 10/14/96

SECKETANY OF STATE TALLAHASSEE, FLORIDA

96 HOV 18 PH 12: 12

Peter A. TALLA HASSEE, FLORIDA

Name of Affiant

STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 14th of October, 1996, by

Peter A. Calvo, who is personally known to me or has produced ______ as identification and did/did not take an oath.

Notary Public

Typed Name: Joseph J. Rohr son
Commission Expires: April 2 2000

Commission No: CC549354