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TO: DIVISION OF CORPORATIONS FAX #: (904) 922-4001
FROM: EMPIRE CORPORATE KIT COMPANY ACCT#: 072450003255
CONTACT: RAY STORMONT
PHONE: (305) 541-3694 FAX #: (305) 541-3770

NAME: DAVIDO, INC.
AUDIT NUMBER.....H96000016637
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
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ARTICLES OF INCORPORATION ●

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OF

DAVIDO, INC.

The undersigned, DAVID COHEN, acknowledges and files in the Office of the Secretary of State of the State of Florida, for the purpose of forming a corporation for profit, in accordance with the laws of the State of Florida, these Articles of Incorporation, as by law provided.

I

NAME AND ADDRESS:

The name of this Corporation shall be:

DAVIDO, INC.

The principal office of the Corporation will be:

1368 NE 163rd Street
N. Miami Beach, FL 33162

II

BUSINESS:

The general nature of the business and businesses to be transacted are as follows:

To transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida or the United States.

Without in any way limiting any of the objects and powers of the Corporation, it is expressly declared and provided that the Corporation, to carry on its business, or for the purpose of accomplishing any of the objects hereinabove mentioned shall have

IRA R. SHAPIRO, P.A.

ATTORNEY AND COUNSELOR AT LAW
SENATOR BUILDING • SUITE 400
13800 BISCAYNE BOULEVARD
MIAMI, FLORIDA 33181

TELEPHONE

DADE (305) 844-3836

FBN. 308943

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the power to make and perform contracts of any kind and description, to do any and all other acts and things, and to exercise any and all other powers, either as principal, agent or broker, conferred by the laws of the State of Florida upon corporations formed under the laws of said State and which now or hereafter may be authorized by law.

III

SHARES:

The authorized capital stock of this Corporation shall consist of: 1000 shares of common stock, \$1.00 par value.

IV

EXISTENCE:

The Corporation shall have perpetual existence.

V

REGISTERED OFFICE AND REGISTERED AGENT:

The initial street address of the Corporation's initial registered office is 13899 Biscayne Boulevard, Suite 400, Miami, Florida 33181. The initial Registered Agent for the Corporation is IRA R. SHAPIRO located at the initial registered office address of the Corporation.

VI

DIRECTORS:

The Corporation shall have not less than one Director, as provided by the By-Laws. Directors shall hold office for one year, or until their successors have been duly elected and

qualified.

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VII

FIRST BOARD:

The following shall constitute the first Board of Directors of the Corporation:

<u>NAME</u>	<u>ADDRESS</u>
DAVID COHEN	1368 NE 163rd Street N. Miami Beach, FL 33162
RIVKA COHEN	1368 NE 163rd Street N. Miami Beach, FL 33162

VIII

INCORPORATOR:

The name and address of the initial Incorporator of the Corporation is as follows:

<u>NAME</u>	<u>ADDRESS</u>
DAVID COHEN	1368 NE 163rd Street N. Miami Beach, FL 33162

IX

GENERAL PROVISIONS:

- (a) The private property of the Stockholders shall not be subject to the payment of any corporate debts to any extent whatsoever.
- (b) Subject to the provisions and conditions of this Article, the Corporation shall have full power and lawful authority to accept property, labor and services in payment for shares of its Capital stock in lieu of cash, at a just valuation to be fixed by its Board of Directors.
- (c) A Director of the Corporation may transact business, borrow, lend, or otherwise deal or contract with the Corporation to the full extent and subject only to the

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limitations and provisions of the laws of the State of Florida and the laws of the United States.

- (d) The Corporation shall indemnify each Director and Officer of the Corporation against all or any portion of any expenses reasonably incurred by her in connection with or arising out of any action, suit or proceeding in which he may be involved, by reason of his being or having been an Officer or Director of the Corporation (whether or not he continues to be an Officer or Director at the time of incurring such expenses), to the full extent permitted by and subject only to the limitations and provisions of the laws of the State of Florida and laws of the United States.

SUBSCRIBED at Miami, Florida, this 25 day of November, 1996.

[Handwritten Signature]

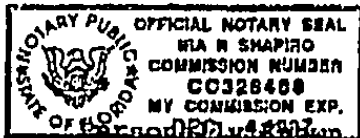
DAVID COHEN

STATE OF FLORIDA)
COUNTY OF DADE) ss:

The foregoing instrument was acknowledged, sworn to and subscribed before me by DAVID COHEN this 25 day of November, 1996.

My Commission Expires:

[Handwritten Signature]
_____, NOTARY PUBLIC



Commission/Serial Number (if any) _____

Type of Identification: OR Produced Identification _____
Driver's License _____ Other: _____

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

DAVIDO, INC.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First-That DAVIDO, INC. desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at the City of North Miami Beach, County of Dade, State of Florida, has named IRA R. SHAPIRO, located at 13899 Biscayne Boulevard, Suite 400, Miami, Florida, County of Dade, State of Florida, as its agent to accept service of process within this State.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above-stated Corporation, at place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

BY: 
IRA M. SHAPIRO,
Registered Agent

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