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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY  
CONTACT: RAY STORMONT  
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ACCT#: 072450003255

FAX #: (305)541-3770

NAME: ALTON HOUSE, INC.

AUDIT NUMBER.....H96000016905

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

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12/3/96  
Ray Stormont

ARTICLES OF INCORPORATION  
of  
ALTON HOUSE, INC.

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I, the undersigned,

NORMAN CIMENT

hereby associate ourselves for the purpose of becoming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the State of Florida, providing for the formation, liability, rights, privileges and immunities of a corporation for profit.

ARTICLE I

The name of the corporation shall be:  
ALTON HOUSE, INC.

ARTICLE II

The general nature of the business and the objects and purposes proposed to be transacted and carried on are to do any and all of the things mentioned, as fully and to the same extent as natural persons might or could do, viz:

a. to engage in any legal business.

b. To make and carry out contracts for buildings, erecting, improving and repairing buildings, structures, improvements, warehouses, docks and structures of every kind and nature whatsoever.

c. In the purchase or acquisition of property, business rights or franchises, or for additional working capital, or for any other object in or about its business or affairs, and without limit as to amount, to incur debt, and to raise, borrow and secure the payment of money in any lawful manner, including issue and sale of

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(305) 538-4431

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other disposition of bonds, warrants, debentures, obligations, negotiable and transferable instruments and evidence of indebtedness of all kinds, whether secured by mortgage, pledge, deed or trust or otherwise.

d. Generally to perform and make contracts of any kind and description and for the purpose of attaining any of the objects of the corporation, to do and perform any other acts or things, and to exercise any and all powers which a co-partnership or natural person could do and exercise, and which now are, or hereafter may be authorized by law, and generally to do and perform any and all things necessary or incident to the performing and carrying out of the powers hereinabove specifically delegated or implied.

ARTICLE III

CAPITAL STOCK

The authorized capital stock of this corporation shall be divided into 100 Shares of common stock of \$1.00 par value.

All said stock shall be payable in cash, property, labor or services at a just valuation to be fixed by the Board of Directors at a meeting called for the purpose, or paid for, with the capital stock at a just valuation to be fixed by the Board of Directors at a meeting called for that purpose. None of the stockholders herein, or anyone who may become stockholders of this corporation, shall have or shall ever have pre-emptive rights in and to any authorized or unissued stock of this corporation until such time as an Amendment to the By-Laws may be passed. This provision is made pursuant to Florida Statute 608.42.

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ARTICLE IV

CAPITAL TO BEGIN BUSINESS

The amount of capital with which this corporation shall commence business shall be a minimum of One Thousand ——— Dollars.

ARTICLE V

CORPORATE EXISTENCE

This corporation shall exist perpetually unless sooner dissolved according to law.

ARTICLE VI

PRINCIPAL PLACE OF BUSINESS

The principal place of business of said corporation shall be 407 Lincoln Road, Suite 704, Miami Beach, Florida 33139. with the privilege of having branch offices at other places within or without the State of Florida.

ARTICLE VII

The Resident Agent designated to accept service of process for the corporation shall be Norman Ciment, 407 Lincoln Road, Suite 704, Miami Beach, Florida 33139.

ARTICLE VIII

The number of Directors of this corporation shall be not less than one (1) nor more than three (3).

ARTICLE IX

DIRECTORS

The names and addresses of the first Board of Directors of this corporation who shall hold office for the first year or

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until their successors are chosen, shall be:

NAME  
NORMAN CIMENT

ADDRESS  
407 Lincoln Road  
Suite 704  
Miami Beach, Florida 33139

ARTICLE X

The name and addresses of the Officers of this corporation who shall hold office for the first year or until their successors are chosen shall be:

NAME  
NORMAN CIMENT, Pres., Sec.-Treas.

ADDRESS  
407 Lincoln Road  
Suite 704  
Miami Beach, Florida 33139

ARTICLE XI

The names and post office addresses of the subscribers and the number of shares each agree to take are:

NAME  
NORMAN CIMENT

ADDRESS  
407 Lincoln Road  
Suite 704  
Miami Beach, Florida 33139

NUMBER OF SHARES

50

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ARTICLE XII

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

In compliance with Section 48.091, Florida Statutes, the  
following is submitted:

First, that ALTON HOUSE, INC.  
(name of corporation)

desiring to organize or qualify under the laws of the State of  
Florida, with its principal place of business at City of \_\_\_\_\_  
Miami Beach, State of Florida, has named \_\_\_\_\_  
Norman Ciment, located at 407 Lincoln Road -  
Suite 704, City of Miami Beach, State of  
Florida, as its agent to accept service of process within Florida.

Norman Ciment, Subscriber

Norman Ciment, President  
Title

Date: December 2, 1996

Having been named to accept service of process for the  
above stated corporation, at the place designated in this Certifi-  
cate, 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.

Norman Ciment, Resident Agent  
Date: 12/2/96

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ARTICLE XIII

ACKNOWLEDGMENT

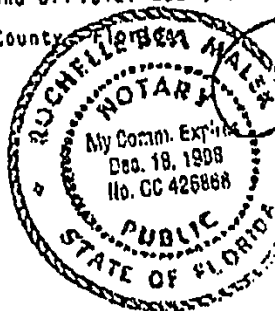
STATE OF FLORIDA }  
COUNTY OF DADE } SS:

I HEREBY CERTIFY that on this 2nd day of December  
1996, personally appeared before me, the undersigned Notary Public  
in and for the State of Florida, NORMAN CIMENT

parties to the foregoing Certificate of Incorporation, and each acknowledged that he or she did make, subscribe and acknowledge the foregoing Certificate as and for his or her voluntary act and deed, and that the facts therein set forth are true and correct as given under my hand and official seal, the day and year written at

Dade

County



*Rochelle Bea Malek*  
NOTARY PUBLIC  
State of Florida at Large  
ROCHELLE BEA MALEK  
My Commission Expires:

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