70000/0365

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 3231

| Tallahassee, FL 32314   |  |
|---|--|
| Re: J. PHILLIP (Name of Co  | PPAREL , Inc.  |
| Gentlemen:  | 5000020723958<br>-01/29/9701052015<br>****122.50 ****122.50  |
| Enclosed please find the original and one copy of the acheck in the amount of \$122.50.                         | Articles of Incorporation, together with my  |
| This represents the cost of the Filing Fees, Certified C<br>Registered Agent Designation for the above named co |  |
| Very trul   | y yours.  FILED  ALLAHASSEE, FEW TALLAHASSEE, FEW TALLAHA |
|   | January Name S   |
|   | V. PHILLIP APPAREL (Name of Corporation)   |
|   | - MAILING ADDRESS OF CORPORATION -   |
|   | SARASOTA, FL   |
| P. CHIESCUA FEB 3 1997  | 3434 PHONE 941) 954-8933 Ext.  |
| nole Form 215; Trans. Letter (0195)   | W47=2582   |
|   | 5.05   |

Seminole Form 215: Trans. Letter (0195)

## ARTICLES OF INCORPORATION

|   | _                    | of  | A STATE OF THE STA |                              |
|---|----------------------|---|--|------------------------------|
| J PHILIP  | APPARE               | L INC                                       | )<br>• • • • • • • • • • • • • • • • • • •   | · '                          |
| •   |                      | corporation)                                | · · · · · · · · · · · · · · · · · · ·  |                              |
| The undersigned acting as the incorporation for su  |                      | tion under the F                            | lorida Business C  | orporation Act, adopt(s)     |
| The name of the corporation is: $T = \begin{cases} C & \text{if } C & \text{if } C \\ C & \text{if } C \end{cases}$ |                      | ORPORATE NA                                 | AME  | 97 JAN<br>TALLAN             |
| This corporation shall exist perpetually  | ARTICLE              | II - DURATION                               |  | 29 PH 1: 58                  |
| The corporation is organized for the pr<br>United States and the State of Florida.                                  |                      | <i>III - PURPOSE</i><br>g in any activition |  | mitted under the laws of the |
|   | 500 share            | AL PRINCIPAL                                | ock, par value \$_ OFFICE  | per share.                   |
| The street address of the initial princip  STREET ADDRESS 2170  | pal office and, if d |   | ling address is:   |                              |
| CITY SARASOT  | A                    | FLORIDA                                     | <u>,</u>   | ZIP 34234                    |
| Mailing address, if different   |                      |   |  |                              |
| STREET ADDRESS  |                      |   | · · · · · · · · · · · · · · · · · · ·  |                              |
|   |                      |   |  |                              |
| CITY  |                      | FLORID                                      | <u> </u>   | ZIP                          |
| ARTICLE V The street address of the initial reg   |                      |   | FICE AND AGE the initial regist  |                              |
| NAME JONATHAN P   | ADLER                | )<br>                                       | ······································   |                              |
|   | EN VIEW              | PL  |  |                              |
| CITY SACAS DIA  |                      | FLORID                                      | A  | ZIP 34235                    |

## ARTICLE VII - INITIAL BOARD OF DIRECTORS ONE ( 2 ) directors initially. The

| ther increased or diminished from time to time by the By-La<br>Idresses of the initial director(s) of the corporation are as follows: | ws, but shall never                   | r be less than one (1).               | The na                                | mes and                                 |
|---|---------------------------------------|---------------------------------------|---------------------------------------|---|
| NAME JONATHAN PADLER  |                                       |                                       | · · · · · · · · · · · · · · · · · · · | <del></del>                             |
| NAME JONATHAN PADLER ADDRESS 4634 HIDDEN VIEW PL  |                                       |                                       |                                       |   |
| EITY SARASOTA   |                                       | -L                                    | ZIP .                                 | 34235                                   |
| NAME  |                                       | · · · · · · · · · · · · · · · · · · · |                                       |   |
| ADDRESS   |                                       |                                       | ·                                     | <del></del>                             |
| CITY  | STATE                                 |                                       | ZIP                                   | · · · · · · · · · · · · · · · · · · ·   |
| NAME  |                                       |                                       |                                       | <u> </u>                                |
| ADDRESS   |                                       |                                       | <u> </u>                              | ··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· |
| CITY  | STATE                                 |                                       | ZIP                                   |   |
| ARTICLE VIII -  | INCORPORATO                           | ORS                                   |                                       |   |
| he names and addresses of the incorporators signing these A   |                                       |                                       |                                       |   |
|   | · · · · · · · · · · · · · · · · · · · |                                       |                                       | <del></del>                             |
| NAME JONATHAN P ADLER ADDRESS 4634 HIDDEN VIEW PL   |                                       |                                       |                                       |   |
| CITY SARASOTA   | STATE                                 | FL                                    | 7IP -                                 | 34235                                   |
| NAME  |                                       | 7 -                                   |                                       | 7 123 3                                 |
| ADDRESS   |                                       |                                       |                                       | ·-····                                  |
| CITY  | STATE                                 |                                       | ZIP                                   |   |
| NAME  | OMIL                                  |                                       |                                       | •                                       |
| ADDRESS   |                                       |                                       |                                       |   |
| CITY  | STATE                                 |                                       | ZIP                                   | <del>. ·</del>                          |
| · · · · · · · · · · · · · · · · · · ·   |                                       |                                       |                                       |   |
| The undersigned incorporator(s) have executed these A   | , 19 <u>97</u> .                      | ration this                           | 2                                     | <del></del>                             |
| 1 3714 - 1.W  |                                       | $\wedge$                              |                                       |   |
| <del></del>   | Jan Ja                                | all                                   | (                                     | Signature)                              |
|   |                                       |                                       | (                                     | Signature)                              |
|   |                                       |                                       | (                                     | Signature)                              |

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

PHILLIP APPAREL, INC.

(name of corporation)

| Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:                    |
|---|
| The above corporation, organized under the laws of the State of Florida with its registered office        |
| as indicated in the Articles of Incorporation  at   |
| located at the aforesaid address, as its registered agent to accept service of process within this state. |

Having been named as registered agent and to accept service of 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 agent.

(Signature)