## P970000 /1552

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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losed is an original a	nd one(1) copy of the artic	eles of incorporation and a	check for :	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	ADDITIONAL COPY REQUIRED	
FROM:	Kelly Name (Prin	ted or typed)	لنا	
760	o Dr. Phillip	s Blud-Sui	te 2-104	· .
	rlando, F	EL 328	LAHASSE	97FEB-3
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

97 FEB 3 AH11.38

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business 557. Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> **ARTICLE I** NAME

The name of the corporation shall be:

Sunshine Design Services. Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7600 DR. Phillips Blud Suite 2-104 Orlando FL 32819

> **ARTICLE III** SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred (100)

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Kelly Northan - Morrcelin 7600 Dr. Phillips Blud. Suite 2-104 Orlando FL 32819

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Kelly Northern-Morcelin 7600 Dr. Phillips BlvD Suite 2-104 Orlando FL 32819

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29 day of JANUARY, 19 97.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## **CERTIFICATE OF DESIGNATION OF** REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

The name of the corporation is_	Sunstine	Deniun.	Services Inc

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

Kelly Northon-Morcelin (NAME)

7600 Dr. Ohillips Blud Suite 2-104 (P.O. BOX OF Mail Drop BOX NOT ACCEPTABLE)

Orlando, FL 32819

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.