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97 HAY -8 AH 8-27

STANDARD TANE TANDARDARDARDA

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

600002171336--1 -05/08/97--01084--013 ****131.25 ****131.25

SUBJECT:	SUPERIOR SCHOOL		
	(Proposed corporate name - must include suffix)		
Enclosed is an original	and one(1) copy of the articles	of incorporation and a	check for
Difference is an original		or moorporation and a	
\$70.00	\$78.75	□\$122.50	X \$131.25
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate	& Certified Copy	Certified Copy
			& Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	NEVA REED		
110111	Name (Printed or typed)		
_			
••	P. 0. BOX 816441 Address		
-	HOLLYWOOD, FL		-
City, State & Zip			
	(305) 287-1437		
Daytime Telephone number			

NOTE: Please provide the original and one copy of the articles.

JN 5-13-97

ARTICLES OF INCORPORATION

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ARTICLE I:

NAME

COCKLET OF STATE

SUPERIOR SCHOOL UNIFORMS, INC.

ARTICLE II:

PRINCIPAL OFFICE

PLACE OF BUSINESS:

OPA-LOCKA, FLORIDA

MAILING ADDRESS:

P. O. BOX 816441

HOLLYWOOD, FLORIDA 33081-6441

ARTICLE III: SHARES - 100

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

NEVA REED

MAILING ADDRESS:

620 N 58 AVENUE

P. O. BOX 816441

HOLLYWOOD, FL 33021

HOLLYWOOD, FL 33081-6441

ARTICLE V:

INCORPORATOR

NEVA REED

620 N 58 AVENUE

HOLLYWOOD, FL 33031

5-6-97 DATE

ARTICLE VI: EFFECTIVE DATE - MAY 15, 1997

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.