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FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: MAIL DIRECT, INC.

AUDIT NUMBER...... H97000007987

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

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FLORIDA DIVISION

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# ARTICLES OF INCORPORATION FOR

#### MAIL DIRECT, INC.

#### NAME

The name of the corporation is: MAIL DIRECT, INC.

#### PRINCIPAL OFFICE

The principal office of the corporation is:

2907 N.W. 21st Ave Oakland Park, FL 33310

## **NUMBER OF SHARES**

The zamber of shares the corporation is authorized to issue is 100 shares with a par value of \$1.00 each.

#### INITIAL BOARD OF DIRECTORS

The incorporator shall hold an organizational meeting at the call of a majority of the incorporators to elect directors and complete the organization of the corporation, or may take such action without a meeting in writing as provided by law.

#### PREEMPTIVE RIGHTS

The Shareholders shall have the preemptive right to purchase unissued shares of the corporation.

#### INCORPORATOR

The name and address of each incorporator is:

SARRY TO KOWIFT
SOIN Pine Island PA, +INF
'Instation, FL 33522

Barry D. Kowitt, Esq. 1801 N. Pine Island Rd., #101 Plantation, FL 33322

154-370-9999 LBRNO 987417

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#### REGISTERED OFFICE AND AGENT

The street address of the corporation's initial registered office and the name of its initial registered agent at that office is as follows:

Barry D. Kowitt 1801 N. Pine Island Rd., #101 Plantation, FL 33322

### **ACCEPTANCE**

The undersigned does hereby accept his appointment as registered agent as set forth above.

IN WITNESS WHEREOF the undersigned incorporator has hereumo set his hand and seal on day of 1997.

STATE OF FLORIDA

)SS

COUNTY OF BROWARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aftersaid and in the County aforesaid to take acknowledgments, personally appeared Barry D. Kowitt to me know to be the person described in and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last afpresaid this Aday of 1997.

Notary Public Session

My Commission Expires:



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