

CORPORATE EXTENSIONS, INC.

TEI (202) 332-4368 • (202) 33-AGENT



April 21, 1997

Department of State, Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

4.00000216.3674---7 -%/02/37--01036--015 +\*\*\*\*70.00 \*\*\*\*\*76.00

Re: BSS, INC.

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of BSS, Inc. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely, CORPORATE EXTENSIONS, INC. ennifer Howard President





997-11049 PP-11049



Sandra B. Mortham Secretary of State

May 13, 1997

CORPORATE EXTENSIONS, INC. 720 SEVENTH STREET, NW, STE. 304 WASHINGTON, DC 20001

SUBJECT: BSS, INC. Ref. Number: W97000011049

We have received your document for BSS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6924.

Sharon Tala Document Specialist Supervisor

Letter Number: 697A00025508

Dear Sharon, if there's any problem, please call

meat 1-800-474-6340. Thank you,

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## ARTICLES OF INCORPORATION

# OF

## **INTERNATIONAL BOAT-SIDE-SERVICES, INC.**

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### **ARTICLE I**

The name of the Corporation is INTERNATIONAL BOAT-SIDE -SERVICES, INC.

#### **ARTICLE II**

The principal place of business and mailing address of this corporation shall be 757 S.E. 17th Street, Suite 319, Ft. Lauderdale, FL 33316.

## **ARTICLE III**

The aggregate number of shares which the Corporation has authority to issue is 5,000,000 shares of common stock with no par value.

#### **ARTICLE IV**

The address of the initial registered office of the Corporation is 757 S.E. 17th Street, Suite 319, Ft.

Lauderdale, Florida 33316, and the name of the Corporation's initial registered agent for service of process at such address is Charles E. Leffler.

#### **ARTICLE V**

The name and address of the incorporator to these Articles of Incorporation is:

CORPORATE EXTENSIONS, INC., 720 Seventh Street, N.W., Suite 304, Washington, DC 20001.

IN WITNESS WHEREOF, I have hereunto set my hand this 21st day of April, 1997.

CORPORATE EXTENSIONS, INC. 720 Seventh Street, N.W., Suite 304 Washington, DC 20001

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

1. The name of the corporation is: INTERNATIONAL BOAT-SIDE-SERVICES, INC.

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

Charles E. Leffler 757 S.E. 17th Street, Suite 319, Ft. Lauderdale, Florida 33316

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 DATE\_ <u>9- 10 </u> PH بې