J. ROSA & ASSOCIATE 7310 W. McNAB ROAD STE, 239 Tamarac, FL 33321 City/State/Lip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Photocopy Will wait Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment 400002218644--5 -06/20/97--01086--003 *****70.00 *****70.00 NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report

Foreign

Other

Limited Partnership

Reinstatement Trademark

D. BROWN JUN 2 3 1997

Examiner's Initials	
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Fictitious Name

Name Reservation



ARTICLES OF INCORPORATION OF

FIRE POWER, INC.

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

ARTICLE I NAME

The name of the corporation shall be.

FIRE POWER, INC.

ARTICLE IL PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 10222 NW 54 Place
Coral Springs. F1 33076

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGESTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Maria Guariniello
10222 NW 54 Place
Coral Springs, F1 33076

ARTICLE V - INCORPORATORS

i,

The name	s and addres	s of the person (s) signing the	Se Artiolae of
meorpora	ition are as i	Ollows:		se Attacks of
Name		GUARINIELL		
Address_		Box 450216	1	
City	Sunrise	State F	lorida7ip	33345
•			···P_	
Name				
Address				
City		State	Zip_	
Name				
Address				
City		State	Zip	
		<u> </u>	in gu	ericiASeal) (Seal) (Seal)
	OF Flor			
Before the Sta	ite and Coun	/ Public authoriz ty set forth abov GUIARINIEL	e, personally:	knowledgements in appeared
Ailleic	2 or tricotbo	nown to be the pration, and who ideas of Incorpor	acknesyledope	d before me that She
IN WI in the	TNESS WHI State and Co	EREOF, I have punty aforesaid, t	hereunto affi:	xed my hand and seal, 199 7.
		Notary Pub	ville/1631 plic, State of F	Norida at large)
(Notar	v Seal)			

MICHELLE ROSA
Commission #1. 70974
Explore Apr. 398
Do-du J h
Alan insurance arvices

MICHELLE ROSA
Commission #CC380974
Expires April 3, 1998
Bonded Through
Alan Insurance Services

My Commission expires: April 3, 1998

<u>B.</u>	Officers:	
Pro	esident:	MARIA GUARINIELLO
Ac	ldress:	P.O.BOX 450216
		Sunrise, F1 33345
	ce President:	
Ad	dress:	
	•	
	relary:	MARIA GUARINIELLO
Αđ	dress:	1.0. Box 430210
		Sunrise, Fl 33345
Tan		
	asurer: dress:	
Au	11 622.	
	-	
(lf)	needed nou	
ade	fitional affia	may attach an addendum to the application listing
	artional Offic	ers and/or directors.)
10.	Name and	Street add Cu
	Traine and	Street address of Florida registered agent:
		Name: MARIA GUARINIELLO
	Office A	ddrees: 10000 WY 54
	0111007	ddress: 10222 NW 54 Place Coral Springs, Fl 33076
		0:-
11.	Registered	City Zip Code agent's acceptance
	•	-Sour a receptance
	Having been	n named as registered agent and to accept service
	p. 0 c c c c c c c c c c c c c c c c c c	OF THE ADDIVE SINIED COMPANION AND THE
	and comple	the performance of my duties, and I am familiar with and accept
	the obligation	ons of my position as registered agent.
	TACEISICI CO.	Denre comotumo. Z N/I
12.	Attached is	a certificate of existence duly authenticated, not more than
	90 days prid	or to delivery of this application to the Department of State,
	by the Secri	etary of State or other official having custody of corporate
13.	111/orce	a Guarinell
	(Signature of	of Chairman, Vice Chairman, or any officer listed in number 9
1.4		
14.		GUARINIELLO, PRESIDENT
	(Nam	e and capacity of person signing application)
		•

97 JUN 20 AM 9: 4.3

CERTIFICATE OF DESIGNATION 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.

T!	he name of the corporation is: FIRE POWER, INC.
T	he name and address of the registered agent and office is:
	MARIA GUARINIELLO
	(Name) 10222 NW 54 Place
	Coral Springs, F1 33076
	(City/State/Zip)
	Signature Micrice Guarine
	Title President
	Date May 30, 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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature Morcie Guazinelle
Date May 30, 1997

REGISTERED AGENT FILING FEE: \$35.00