P97000084450

9/30/97

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

9138 AM

(((H97000016206 9)))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305) 599-0839

NAME: COLDSWEATS, INC.

AUDIT NUMBÉR..... H97000016206

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

CERT. OF STATUS...1

PAGES..... 3

CERT. COPIES.....0

DEL.METHOD. FAX

EST. CHARGE.. \$78.75
NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

5

97 SEP 30 PHI2: 25
SECHARISMENT ORIDA

DNC 9.30.97



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 30, 1997

FAS-T CORP AGENTS INC

SUBJECT: COLDSWEATS, INC.

REF: W97000022304

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refex the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refex this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 487-6931.

Becky McKnight Document Specialist FAX Aud. #: E97000016206 Letter Number: 197A00048102

FILED

ARTICLE OF INCORPORATION

97 SEP 30 PH 12: 25

OF

SECIL MAY A STATE TALLAMASSEE, FLORIDA

COLDSWEATS , INC.

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

ARTICLE I HAME

The name of the corporation shall be: COLDSWEATS , INC.

The principal place of business of this corporation shall be: 8857 NW. 117 TH. 6T. HIALEAH GARDENS, FL. 33018

ARTICLE II MATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business parmitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 = \$ 10.00 = \$ 1,000.00

ARTICIA IV TERM OF EXISTENCE

This corporation is to exist perpetually.

PREPARED BY: BASIC ACCOUNTING SERVICE 692 W. 29 Street #9 Highen, florids 33012

(305) 887-4185

ARTICLE Y OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

JOSE C. FERRER

PLRECTOR

8857 MW. 117 TH. ST.

HIALEAH GARDENS. FL. 33018

ARTICLE VI INCORPORATOR (8)

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

JOSE C. FERRER

PRESLOUNT, SECRETARY & TREASURER

8857 NW. 117 TH. ST.

100 mhares

Signature/Title

HIALEAH CARDENS, FL. 33018

The tio	undersigned n this <u>26 th</u> .	has (have)day of_	executed September	these	Article 1997	s of In	corpora	•
						R.	2/	
				8	gnature	Alete		
				8:	gnature	/Title		

FILED

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

97 SEP 30 PM 12: 25

SECTION OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0501 or 617.0501, Plorida 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 Plorida.

1. The name of the corporation is:	
COLUSWEATS , INC.	
2. The name and address of the registered agent and office	
ibJOSE_ C. FERRER	
(Name)	
8857 NW. 117 TH. ST.	
(P. O. BOX NOT ACCEPTABLE)	
HIALEAH GARDENS , FLORIDA 33018	
(CITY/STATE/ZIP)	•
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTYES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF HI POSITION AS MY POSITION AS REGISTERED AGENCY.	フ
DATE 09-26-97	