097000091037

Date September 29,1997

	September 29,1997	
Secretary of State Division of Corporations P. O. Box 6327 Talahussee, FL 32314		9000023258792 -10/21/9701063007 ****122.50 ****122.50
Re:	(name of corporation)	, Inc.
Gentlemen:		
	d and one copy of Articles of Incorporation,	together with my check in the
This represents the cost of the Registered Agent Designation	Filing Fees, Certified Copy of Articles of for the above named corporation.	of Incorporation and Fee for
3	Very truly yours,	
	(name o	Stropoli dual's name) 2, Inc. 14 2, Inc. 14 32796

- PHONE -

Number

Ext.

(**%7**) Area Code 26.25

ARTICLES OF INCORPORATION

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida. ARTICLE I - CORPORATE NAME The name of the corporation is: JS2 Inc. ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue Ten Howard shares (1000) of One ____) par value Common Stock, which shall be designated "Common Shares." ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is: Junes Stropoli NAME 1/6 West Green tree Lane ADDRESS FLORIDA ZIP 32796 The principal office, if known, or the mailing adress of the corporation is: JS2 Inc. NAME 116 West Green free Lane ADDRESS FLORIDA ZIP 32796 ARTICLE VI - INITIAL BOARD OF DIRECTORS This corporation shall have Two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows: James Stropoli NAME ADDRESS Lake Many STATE FL ZIP 32746 CILA NAME Lakeshore Orine Serry STATE FL ADDRESS CITY ZIP 32707 NAME ADDRESS STATE

PAGE 1

graph continues of the

FORM 215: ARTICLES OF INCORPORATION, PAGE 1.

ARTICLE VII - INCORPORATORS

The familes and addresses of the incorpor	ators signing these Articles of Incorporation a	re as follows:
NAMI: James Stopol;		
ADDRESS 1/6 W Green tree 2	ane	
TITY Lake Mary	STATE FC	7.11 32786
IAMIE Jimmy Marchall.	Se //exs	
DDRESS 1417 Lake share Or	re	
my Casselberry	STATE FC	ZIP 32707
AMIL		
DDRESS		
IIY	STATE:	ZIP
IN WITNESS WHEREOF, the undersigned day of October, 1997.	d subscriber(s) have executed these Articles of Ir	ncorporation this 320
	Ja Styl.	(Seal
	- Afternay 111 Selles	(Scal
STATE OF FLORIDA)	
COUNTY OF		
before me, a Notary Public authorized to tappeared:	ake acknowledginents in the State and County s	et forth above, personally
Signature	Form of Identifi	cation
Signature	Form of Identifi	cation .
Signature	Form of Identifi	galius.
known to me and known to be the person(s) where that executed these Articles are desired person as indicated opposite each results.	to executed the foregoing Articles of Incorporation	
HOTARY RUIIIUR STAMF SI AL	Witness my hand and official scal in the Cour	ty and State last a foresaid this
	Nutury Signature	
	Printed Natury Signiture	

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

P9700009008

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See instructions on back. For a call 1-800-PICK-UPS (800-74	additional information,	:	ZND DAY HARGE		s	
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ARTICLES OF INCORPORATION OF

Save on Electronics & Appliances, 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:

Save on Electronics & Appliances, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5700 Okeechobee Blvd. Bay # 546 &547 West Palm Beach, Fl 33417

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:

Eytan Adda 8084 NW 15 Manor Plantation, Fl 33322

ARTICLE V - INCORPORATORS

The names and address of the person (s) signing these Articles of Incorporation are as follows:

Name Eytan Adda

Name Eytan Adda		
Address 8084 NW 15	Manor	
City Plantation	State F1	Zip 33322
-		<u> </u>
Name Aharon Oren A	zmi	
Address 1105 NW 80 T	errace #F	
City Margate	StateF1	Zip 33063
Name Inbar Adda		
Address 8084 NW 15	Manor	
City Plantation	State F1	Zin 33322

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 24 day of Sept 1997.

(Seal)

STATE OF <u>Florida</u>) SS COUNTY OF Broward)

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Eytan Adda, Aharon Oren Azmi, And Inbar Adda

known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that they executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this, 24 day of sept. 1997.

(Notary Public, State of Florida at large)

(Notary Seal)

My Commission expires: April 3, 1998



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.

1.	The name of the corporation is	:		
	Save on Electronic	&	Appliances,	Inc.

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

Eytan Adda
(Name)
8084 NW 15 Manor
(P.O. Box NOT acceptable)
Plantation, F1 33322
(City/State/Zip)

Signature

Title President

Date Sept. 24, 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

Date Sept. 24, 1997

REGISTERED AGENT FILING FEE: \$35.00

3. Officers:	•
President:	Eytan_Adda
Address:	8084 NW 15 Manor
	Plantation, Fl 33322
-	
Vice President:	Aharon Oren Azmi
Address:	1105 NW 80 Terrace #F
	Margate, Fl 33063
-	Inbar Adda
Address:	8084 NW 15 Manor
	Plantation, Fl 33322
Т	Novem 6
Treasurer:	Aharon Oren Azmi
Address:	1105 NW 80 Terrace #F
	Margate, Fl 33063
	may attach an addendum to the application listing cers and/or directors.)
10. Name and	Street address of Florida registered agent:
	Name: Eytan Adda
Office A	Address: 8084 NW 15 Manor
	Plantation, Fl 33322
	City Zip Code
11. Registered	i agent's acceptance:
**	
	en named as registered agent and to accept service
	for the above stated corporation at the place designated
• •	plication, I hereby accept the appointment as registered agent
-	to comply with the provisions of all statutes relative to the proper
	lete performance of my duties, and I am familiar with and acceptations of my position as registered agent.
Parietara	d agent's signature:
12. Attached	is a certificate of existence duly authenticated, not more than
	orior to delivery of this application to the Department of State,
	ecretary of State or other official having custody of corporate
	n-the jurisdiction under the law of which it is incorporated.
13.	(/) *
(Signatur	re of Chairman, Vice Chairman, or any officer listed in number 9
	oplication)
• •	tan Adda, President
	ame and capacity of person signing application)