

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: UNIQUE PRODUCTS + SERVICES, TNC. (Proposed corporate name - must include suffix)

200002329472-9 -10/24/97-01111-005 *****78.75 ******78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75 Filing Fee

Filing Fee & Certificate

\$122.50

\$131.25

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: KA+HLEEN M. PHTLIUS ULYSSE
Name (Printed or typed)

1820 NE 142ND Street #50

NOR+H MIAME FL. 33181

(305) 944-9034

Daving Telephone number

97 OCT 24 PM 4: 35

TANGES OF A 5

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation. ARTICLE I The name of the corporation shall be: UNEQUE PRODUCTS + GERVICES, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 1820 NE 142 ND STREET #5 C NORTH MIAMI, FL. 33181 ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000,000 SHARES. ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: KATHLEEN M. PHILIUS ULYSSE/PRESIDENT, VICE PREBIDENT, 1820 NE 142 ND STREET #50. DIRECTOR, TREASURE ROND SECRETARY 1820 NE 142 ND Street #5C ARTICLE V MEORPORATOR 33181 The name and address of the incorporator to these Articles of Incorporation are: KA+HLEEN M. PHILIUS ULYSSE DENT, VICE PRESIDENT, KA+HLEEN M. PHILIUS ULYSSE DIRECTUR, TREASURER and SECRETARY 1820 NE 142 ND STREET # 5C

(An additional article must be added if an effective date is requested.)

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/Registered Agent

NORTH MEAME EL. 331 81

Signature/Incomporator

Date