Hoffmeier Accounting & Jax Service, Inc. 5101 N.W. 21st Avenue, Suite 200, Fort Lauderdale, Florida 33309 Phone (305) 735-8770 • Fax (305) 733-9220

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STATE OF FLORIDA DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

600002329826 -10/27/97--01024--013 ****122.50 ****122.50

GENTLEMEN:

ENCLOSED PLEASE FIND ARTICLES OF INCORPORATION FOR STORE, INC. ALONG WITH OUR CHECK IN THE AMOUNT OF \$122.50 TO COVER THE FILLING COST OF THIS CORPORATION. IF YOU HAVE ANY QUESTIONS REGARDING THIS MATTER, PLEASE CONTACT US AT THE ABOVE ADDRESS OR TELEPHONE NUMBER.

THANK YOU,

LISA J. DARBRO

ACCOUNTING

BOOKKEEPING

TAX SERVICES

FINANCIAL STATEMENTS 10129

ARTICLES OF INCORPORATION FILED

OF OMA STORE, INC. 97 OCT 27 AM 11: 37

SECRETART OF STATE TALLAHASSEE, FLORIDA

OMA STORE, INC.

THE UNDERSIGNED SUBSCRIBER TO THESE ARTICLES OF INCORPORATION IS A NATURAL PERSON, COMPETENT TO CONTRACT, ASSOCIATED TO FORM A CORPORATION FOR PROFIT UNDER THE LAWS OF THE STATE OF FLORIDA: AND FURTHER AGREES TO THE FOLLOWING CONDITIONS OF SAID CORPORATION.

ARTICLE I: NAME

THE NAME OF THE CORPORATION IS: OMA STORE INC.

ARTICLE II: NATURE OF BUSINESS

THE GENERAL NATURE OF THE BUSINESS AND THE OBJECTS AND PURPOSES PROPOSED TO BE TRANSACTED BY THE CORPORATION, AND THE POWERS AND PRIVILEGES TO BE EXERCISED BY IT SHALL INCLUDE ALL POWERS THAT ARE GIVEN TO THE BODIES CORPORATE UNDER THE STATUTES OF THE STATE OF FLORIDA, AND THE LAWS OF THE UNITED STATES, TOGETHER WILL ALL RIGHTS POWERS AND PRIVILEGES INCIDENT THERETO.

ARTICLE III: CAPITAL STOCK

THE CAPITAL STOCK OF THE CORPORATION SHALL CONSIST OF ONE HUNDRED (100) SHARES OF A PAR VALUE OF ONE (\$1.00) DOLLAR EACH, WHICH STOCK SHALL BE PAID FOR IN CASH, REAL OR PERSONAL PROPERTY OR IN SERVICES. THE VALUE OF EACH SUCH REAL OR PERSONAL PROPERTY OR SERVICES SHALL BE FIXED BY THE BOARD OF DIRECTORS OF SAID CORPORATION, AND THE STOCK SHALL BE ISSUED ON THE VALUE SO FIXED. ALL STOCK SHALL BE FULLY PAID FOR AND NON-ASSESSABLE.

ARTICLE IV: TERM OF EXISTENCE

THIS CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS IT BE DISSOLVED BY ACTION OF LAW.

ARTICLE V: PLACE OF BUSINESS
INITIAL REGISTERED OFFICE
INITIAL REGISTERED AGENT

THE INITIAL REGISTERED OFFICE AND PLACE OF BUSINESS OF THIS CORPORATION IN THE STATE OF FLORIDA IS:

PLACE OF BUSINESS

4949 SW 13TH STREET FT LAUDERDALE FL 33317

REGISTERED OFFICE

4949 SW 13TH STREET FT LAUDERDALE FL 33317

THE INITIAL REGISTERED AGENT IS:

OVIDIO AMAYA 4949 SW 13TH STREET FT LAUDERDALE FL 33317

ARTICLE VI: DIRECTOR

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NUMBER OF DIRECTORS MAY BE CHANGED FROM TIME TO TIME AS THE STOCKHOLDERS DESIRE, IN ACCORDANCE WITH THE BY-LAWS HEREOF.

ARTICLE VII: INITIAL DIRECTORS

THE NAME AND STREET ADDRESS OF THE FIRST BOARD OF DIRECTORS IS AS FOLLOWS:

NAME OVIDIO AMAYA ADDRESS
4949 SW 13TH STREET
FT LAUDERDALE FL 33317

ARTICLE VIII: SUBSCRIBERS

THE NAME AND STREET ADDRESS OF THE SUBSCRIBERS TO THESE ARTICLES OF INCORPORATION IS AS FOLLOWS:

NAME OVIDIO AMAYA ADDRESS
4949 SW 13TH STREET
FT LAUDERDALE FLORIDA 33317

ARTICLE IX: AMENDMENT

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY LAW. EVERY AMENDMENT SHALL BE APPROVED BY THE BOARD OF DIRECTORS, PROPOSED BY THEM TO THE STOCKHOLDERS, AND APPROVED AT A STOCKHOLDERS MEETING BY A MAJORITY OF THE STOCKHOLDERS.

 I, OVIDIO AMAYA, UNDERSIGNED DO ACKNOWLEDGE THAT I AM FAMILIAR WITH DUTIES AND RESPONSIBILITIES AS A REGISTERED AGENT FOR A

CORPORATION, AND AS SUCH, DO HEREBY ACCEPT AS REGISTERED AGENT FOR

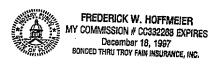
OMA STORE, INC.

Molio Conoya (SEAL)

97 OCT 27 AM II: 38
SECINETIAN DE STATE
TALLAMASSI E ELORIE.

STATE OF FLORIDA)
)ss:
COUNTY OF BROWARD)
I HEREBY CERTIFY THAT ON THIS DATE, BEFORE ME, A NOTARY PUBLIC
DULY AUTHORIZED IN THE STATE AND COUNTY ABOVE NAMED TO TAKE
ACKNOWLEDGEMENTS, PERSONALLY APPEARED
OVIDIO AMAYA (ndio Amoya
TO ME KNOWN TO BE THE PERSON DESCRIBED AS SUBSCRIBER IN AND WHO DID
EXECUTE THE FOREGOING ARTICLES OF INCORPORATION.
x
WITNESS MY HAND AND OFFICIAL SEAL THIS 15T DAY OF
october, 1997.
NOTARY PUBLIC -STATE OF FLORIDA

MY COMMISSION EXPIRES:



STATE OF FLORIDA)
)ss:
COUNTY OF BROWARD)
I HEREBY CERTIFY THA	T ON THIS DATE, BEFORE ME, A NOTARY PUBLIC,
DULY AUTHORIZED IN THE ST	TATE AND COUNTY ABOVE NAMED TO TAKE
ACKNOWLEDGEMENTS, PERSONA	OVIDIO AMAYA Ordio Amaya
TO ME KNOWN TO BE THE PER	SON DESCRIBED AS REGISTERED AGENT AND WHO
DID HEREBY ACCEPT AS REGI	STERED AGENT.
WITNESS MY HAND AND	official seal this 15T day of 1997.
1	n.

MY COMMISSION EXPIRES:

