P97000097686

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

SUBJECT: JANE DISTRIBUTION, INC
I enclose an original and I copy(ies) of the Articles of
Incorporation for the above corporation and a check in the amount
of \$122.5.

SIGNED: Jane 5. Simonelli

Address Sounton Beh, FL 33435 City State Zip

Telephone Number

Name.

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SECRETARY OF STATE
TAIL ANASSEE, FLORIDA

9×11-17-97

ARTICLES OF INCORPORATION OF JANE DISTRIBUTION, INC

ARTICLE I JANE DISTRIBUTION, INC

The name of the corporation shall be: JANE DISTRIBUTION, INC.

ARTICLE II PRINCIPAL OFFICE

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

712 OCEAN INLET DR.

Boynton Bch., FL 33435

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000. ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS The name and address of the initial registered agent is: Jane S. Simonelli

712 Ocean Inlet Dr

Boyton Bch., FL 33435

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Jane S. Simonelli 712 Ocean Inlet Dr. Boynton Bch., FL 33435

The undersigned has executed these Articles of Incorporation this 10th day of Nov. 1997.

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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:
JANE DISTRIBUTION, ENC.
2. The name and address of the registered agent and office is:
712 Ocean Inlet Dr.
Bountin Beh, FL 33435
Signature: Jone S. Sem chelli
Title: Infocorator
Date: 11-10-97

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: Janes Semonalli:
Date: 11-10-97

97 NOV 14 PM 12: 2 SECRETARY OF STATE