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SECRETARY OF STATE TALLAHASSEF, FLORIDA

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

EFFECTIVE DATE

SIGNATURE GRAPHICS, INC.

SUBJECT:

(Proposed corporate name - must include suffix)

900002347539--6 -11/14/97--01069--012 ******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

¾ \$78.75

Filing Fee

& Certificate

□\$122.50

Filing Fee

☐ \$131.25 Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM Julia M. Del Der

Name (Printed or typed

1030 U.S. Highway 1, Suite 303

North Palm Beach, FL 33408

(261) 652-1883

Daytime Telephone number

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

FILED

ARTICLES OF INCORPORATION

obligations of my position as registered agent

Signature/Registered Agent

ARTICLE I

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The undersigned incorporator, for the purpose of forming a corporation under the Florida SECRETARY OF STATE Business Corporation Act, hereby adopts the following Articles of Incorporation.

provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the

Acticles of Ir	reorporation		
Corporate Name:	Signature (and, einigare	•
	- Charles	2 Dite	
	- date	of this	corporation
The eff shall be	Tanuary 1.	1998.	
shall be e			
	<u>.</u> <u></u>	Salara Salara Salara	
SigneD,			
Julia H. I	Sel Dear	11/12/97	
Register BD A	ent AND Inc	orparadi.	
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Constitution of the Consti			

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