CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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FILED TERETARY OF STATE TRIBLE OF CORPORATIONS

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Signature		
Requested by:	11/18	11:18
Name	Date	Time
Walk-In	Will Pick Up	

Art of Inc. File	
LTD Partnership File	
Foreign Corp. File	
L.C. File	
Fictitious Name File	••
Trade/Service Mark	
Merger File	
Art, of Amend, File	
RA Resignation	
Dissolution / Withdrawal	
Annual Report / Reinstatement	
Cert. Copy	
Photo Copy	
Certificate of Good Standing	
Certificate of Status	•
Certificate of Fictitious Name	
Corp Record Search	, .
Officer Sentch	
Fictitious Search	
Fictitious Owner Search	
Vehicle Search	
Driving Record	
UCC 1 or 3 File	
UCC 11 Search	
UCC 11 Retrieval	
Courier	
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ARTICLES OF INCORPORATION OF UNNIPON, INC.

The undersigned Incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

Article I, Name
The name of the corporation shall be:
Unnipon, Inc.

Article II, Mailing Address
The mailing address of this corporation shall be:
7345 Sand Lake Road, #202 - Orlando, FI 32819

Article III, Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 Shares with \$ 1.00 Par Value.

Article IV, Initial Registered Agent and Street Address
The name and address of the initial registered agent is:
Donald A. Sutton
Address:
5850 Lakehurst Dr., #210, Orlando, FI 32819

Article V, Incorporator.

The name and address of the Incorporator to these Articles of Incorporation is:

Donald A. Sutton Address: 5850 Lakehusrt Dr. # 210, Orlando, Fl 32819 Continuation, Page 2

Article VI, Purpose.

The purpose of this corporation shall be to act in commerce, sell, buy, import and export all types of merchandise goods and services, marketing consulting, as well as to be the representative of other companies if so is desired. This Corporation will trade with international and national corporations and individuals alike, always respecting the regulations existing in those areas. These objectives should not affect the capability to do all other businesses under the Laws of the United States of America and the State of Florida.

Article VII, Initial Board of Directors and Officers.

The names and Post Office Addresses of the members of the first board of directors and Officers are:

Celma Domingues Machado - President, Vice President, Treasurer, Secretary and Director.

Postal address at: 7345 Sand Lake Road # 202, Orlando, Fl 32819

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Affidavit
State of Florida, Orange County.

Before me this day personally appeared Donald A. Sutton, who being duly sworn, depose and say that he is the Incorporator of Unnipon Inc., and is hereby duly authorized, responsible and apt to Incorporate according to the Statutes or the State of Florida.

Donald A. Sutton

Sworn to and subscribed before me this

day of November, 1997.

Notary Public

OFFICIAL NOTARY SEAL LINDA M BASTOS NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC574644 MY COMMISSION EXP. AUG. 5, 100 s

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: UNIPPON, JNC.	>
2. The name and address of the registered agent and office is:	E
DONALD A. SUTTON (Name) 5850 (akehurst Dr. # 210 (P.O. Box not acceptable) OYLANDO - FL 32819 (City/State/Zip)	VISION OF CORPORATION 97 NOV 18 PM 12: 56
Having been named as registered agent and to accept service of process for above stated corporation at the place designated in this certificate, I hereby the appointment as registered agent and agree to act in this capacity. I furt to comply with the provisions of all statutes relating to the proper and comprising of my duties, and I am familiar with and accept the obligations of my as registered agent.	or the vaccept her agree viete perforposition
STATE OF FLORIDA COUNTY OF	OS OF FLORIDA CC574644

Type of Identification Produced_