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CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: SAMCARLI, INC.

AUDIT NUMBER...... H97000020718

DOC TYPE......FLORIDA PROFIT CORPORATION OR P.A.

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ARTICLES OF INCORPORATION

OF

SAMCARLI, INC.

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

ARTICLE I

The name of the corporation shall be: SAMCARLI, INC.

ARTICLE II

The principal place of business and mailing address of the corporation shall be: 1108 VALENCIA, CORAL GABLES, FLA. 33134.

ARTICLE III

This corporation may engage in any act or business permitted under the laws of the State of Florida.

ARTICLE IV

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares of common stock of the par value of one dollar (\$1,00) per share.

This corporation shall commence its existence immediately upon the filing of the Articles of Incorporation and shall perpetually thereafter be in existence unless somer dissolved by and in accordance with Florida law.

PREPARED BY:
ARMANDO J. BUCELO, JR., ESQ.
2828 CORAL WAY, SUITE 307
MIAMI, FLA. 33145
(305) 442-1945
FLA. BAR NO. 280755

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ARTICLE VI

The name and address of the initial registered agent is: TERESITA SHELTON, 1108 VALENCIA, CORAL GABLES, FLA. 33134-

ARTICLE VII

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

TERESITA SHELTON
1108 VALENCIA
CORAL GABLES, FLA. 33134

ARTICLE VILL

The names and addresses of the members of the first Board of Directors is:

TERESITA SHELTON
1108 VALENCIA
CORAL GABLES, FLA. 33134

ARTICLE IX

The initial bylaws shall be adopted by the Board of Directors. The power to alter, amend or repeal the bylaws or adopt new bylaws shall be vested in the Board of Directors. The bylaws may contain any provisions for the regulation and management of the affairs of the corporation not inconsistent with the Florida General Corporation Act or these Articles of Incorporation.

Any contract or other transaction between the Corporation and any one or more of its directors are shareholders, members, directors, officers or employees, or in which they are interested, shall be valid for all purposes, notwithstanding the presence of the director or directors at the meeting of the Board of Directors of the corporation that acts upon, or in reference to the contract or transaction, and notwithstanding his or her participation in the action, if the fact of such interest shall be disclosed or known to the board of directors, the interested director is to be counted in determining whether a quorum is present and to be entitled to vote on such authorization or ratification.

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ARTICLE X

The private property of the shareholders shall not be subject to payment of the corporate debts to any extent.

ARTICLE XI

This Corporation shall have the power to indemnify and insure its officers and directors to the fullest extent permitted by law.

The undersigned has executed these Articles of Incorporation on this _____ day of DECEMBER, 1997.

TERESITA SHELTON INCORPORATOR

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 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.

First that, <u>SAMCAREI</u>, <u>INC.</u>, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation, has named TERESITA SHELTON, located at 1108 VALENCIA, CORAL GABLES, FLA. 33134, as its agent to accept service of process within this State.

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.

STGNATURE

Régistered Agent

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SECRETARY OF STATE
TALLAHASSEE FLORINA