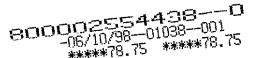
## P980052607

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



BJECT:		ntsetc., Inc		
	(Floposed corpe	rate hame a must menue su		
closed is an original an	d one(1) copy of the article	es of incorporation and a	check for :	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy	
		ADDITIONAL CO	& Certificate  OPY REQUIRED	
FROM:	Lourdes N	N. Rudd Printed or typed)	<del></del> -	
		49 Terrace	<del></del>	
	South Mic	1M1, FL 33155 , State & Zip	-6100 FA	SECRET
	(305) 669	<u>-</u>	SEE, FL	JUN IO AN
	Dayume	a wayaawaa aaaawaa	ORIDA	M 8: 26

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

ne 6/12/98

## FILED

## ARTICLES OF INCORPORATION

JUN 10 AM 8: 27

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

ARTICLE I NAME

1 / 13

The name of the corporation shall be:

Paper Prints ... etc., Inc.

PRINCIPAL OFFICE ARTICLE II

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

6601 S.W. 49 Terrace South Miami, FL 33155-6100

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1.000

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Lourdes M. Rudd 6601 S.W. 49 Terraces

South Miami, FL 33155-6100

INCORPORATOR

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

Lourdes M. Rudd 6601 S.W. 49 Terrace South Miami, FI 33155-6100

Signature/Incorporator

6-5-98

(An additional article must be added if an effective date is requested.)

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/Registered Agent