Law Offices HURLEY PARTIN WHITAKER

Professional Association

Hurley Partin W

P. O.Box 6327 Tallahassee, FL 32314

Department of State Division of Corporations

Re: AUTOGRAPHICALLY YOURS, INC.

Dear Sir/Ms.:

Enclosed is an original and one copy of the articles of incorporation and a check in the amount of \$122.50. Please file and send a certified copy to the address below. Thank you for your prompt attention to this matter.

Very truly yours

HURLEY PARTIN WHITAKER

HPW/sw Enclosure(s)

F. CHESSER JUL 2 4 1998

312 S. Harbor City Boulevard, Suite 1, Melbourne, FL 32901 Phones: (407) 254-3399 or (407) 727-2903; Fax: (407) 723-8694

ARTICLES OF INCORPORATION

ARTICLE I - Name:

The name of the corporation shall be AUTOGRAPHICALLY YOURS,

ARTICLE II - Address:

The address of the principal office of the corporation is 4635 N. US 1, Melbourne, Florida 32835 and the mailing address of the corporation is P. O. Box 360003, Melbourne, Florida 32936.

ARTICLE III - Shares:

The number of shares of stock that this corporation is authorized to issue is 100.

ARTICLE IV - Initial Registered Agent:

The street address of the initial registered office is 4635 N. US 1, Melbourne, Florida 32935 and the name of the initial registered agent is Thomas Hellebrand.

ARTICLE V - Incorporators:

The name and street address of each incorporator is:

Thomas Hellebrand 4635 N. US I Melbourne, FL 32935

Donna Hellebrand 4635 N. US I Melbourne, FL 32935

ARTICLE VI - Initial Directors:

The name and street address of each initial director is:

Thomas Hellebrand 4635 N. US 1 Melbourne, FL 32935 Donna Hellebrand 4635 N. US 1 Melbourne, FL 32935

ARTICLE VII - Shares:

The par value for authorized shares shall be \$1.00.

The undersigned incorporators have executed these Articles of Incorporation this $\frac{\partial D}{\partial t}$ day of July 1998.

Thomas Hellebrand

Donna Hellebrand

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: AUTOGRAPHICALLY YOURS, INC.
- 2. The name and address of the registered agent and office is:

Thomas Hellebrand 4635 N. US 1 Melbourne, FL 32935

Having been named as registered agent and to accept service of process for the above 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.

Date

Thomas Hellebrand

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SILCRETARY OF STATE