WTAL DETTER FILED AUG 18 PM 4: 19 98 SECRETARY OF STATE TALLAHASSEE, FLORIDA Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 <u>IROPEKA</u> <u>PRODUCTS</u> <u>INC.</u> (Proposed corporate name - must include suffix) SUBJECT: . ě. 700002619437--6 -08/19/98--01001--013 ****131.25 ****131.25 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$131.25 **\$70.00** \$78.75 **\$122.50** Filing Fee Filing Fee, Filing Fee Filing Fee & Certified Copy & Certificate Certified Copy & Certificate ADDITIONAL COPY REQUIRED FROM: William H. BRUCE Name (Printed or typed) 19390 Collins AUF Suite 1419 Address SUNNY IS/ES FL. 33160 City. State & Zip DIVISION OF CORPORATION 98 AUG 18 PM 4: 12 <u>JOS 93 (-9/1)</u> Daytime Telephone number AUG 1 8 1990. P.Hall

ł

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

TROPEKA PRODUCTS INC.

ARTICLE II PRINCIPAL OFFICE

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

19390 CollINS AVE SUITE 1419 SUNNY Isles FL. 33160

ARTICLE III SHARES

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

100 Share

ARTICLE IV **INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

19390 COLLINS AVE #1419 SUNNY Isles FL. 33160

ARTICLE'V INCORPORATOR

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

19390 Collins Ave. Apt. 1419, Sunny Isles, FL. William H BRUCE PRES. SANDRA BERNSTEIN V.P. 331.60 8/18/98 atteni 8/181 Signature/Incorporator

(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

8/18/98

FILED

98 AUG 18 PM 4:19

SECRETARY OF STATE TALLAHASSEE, FLORIDA