

TRANSMITTAL LETTER

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

SUBJECT: Waikiki Beachwear, Inc.  
(Proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for  
\$ 122.50.

FROM:

Michael Ben Hampton  
Name (printed or typed)  
9219 N.W. 45 STREET  
Address  
SUNRISE, FL. 33351  
City, State, & Zip  
(954) 746-9482  
Telephone Number

APPROVED  
AND  
FILED  
98 AUG 21 AM 9:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

B. BROCK AUG 24 1998

APPROVED  
AND  
FILED

98 AUG 21 AM 9:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF INCORPORATION

OF

Waikiki Beachwear, Inc.

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

## ARTICLE I NAME

The name of the corporation shall be:

Waikiki Beachwear, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

9219 N.W. 45 STREET  
SUNRISE, FL. 33351

## ARTICLE III SHARES

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

100 SHARES (NO PAR VALUE)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michelle Ben Huron  
9219 N.W. 45 STREET  
SUNRISE, FL. 33351

**ARTICLE V INCORPORATOR(S)**

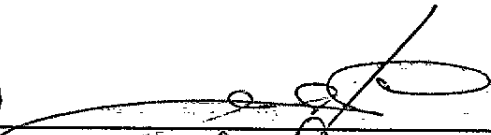
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Michael Ben Hamron, <sup>VICE</sup> PRESIDENT, SECTY-TREAS, DIRECTOR,  
9219 N.W. 45 STREET ORIGINAL INCORPORATOR  
Sunrise, FL. 33351

Simon Ziv, PRESIDENT, DIRECTOR, ORIGINAL  
9219 N.W. 45 STREET INCORPORATOR  
Sunrise, FL. 33351

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

18 day of AUGUST, 19 98.

(X)   
Signature  
(X) Michael Benhamron  
Signature  
  
\_\_\_\_\_  
Signature

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

*Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the under-  
signed 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: WATUKI BEACHWEAR, INC.

2. The name and address of the registered agent and office is:

Michael BEN HAMMON  
(Name)  
9219 N.W. 45 STREET  
(P.O. Box NOT acceptable)  
SUNRISE, FL. 33351  
(City/State/Zip)

*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 Michael Benhamron  
DATE 8/18/98

REGISTERED AGENT FILING FEE: \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

APPROVED  
AND  
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TALLAHASSEE, FLORIDA