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FLORIDA DIVISION OF CORPORATIONS

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CONTACT: AL CLARK  
PHONE: (813)398-6011  
(813)397-5189

FAX #:

NAME: STORK DELIVERIES PLUS, INC.

AUDIT NUMBER.....H98000016035

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

CERT. OF STATUS..0

PAGES..... 3

CERT. COPIES.....0

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## ARTICLES OF INCORPORATION

*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

STORK DELIVERIES PLUS, INC.

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### ARTICLE II PRINCIPAL OFFICE

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

13854 75<sup>TH</sup> AVENUE N.  
SEMINOLE, FL.33776

### ARTICLE III SHARES

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

1000 SHARES  
NO PAR

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:  
prepared by:

Name: MARY TAYLOR  
Address: 13854 75<sup>TH</sup> AVENUE N.  
SEMINOLE, FL.33776

Accounting & Tax Help, INC.  
8668 PARK BLVD Suite A  
SEMINOLE, Florida 33777

PH # 727-397-3448

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FROM : ACCOUNTING & TAX HELP INC. . PHONE NO. : 8135287222 393 1766 Aug. 27 1998 10:36AM P3  
FROM : ACCOUNTING & TAX HELP INC. PHONE NO. : 8135287222 393 1766 Aug. 25 1998 09:25AM P3

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**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

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

MARY TAYLOR  
13854 75<sup>TH</sup> AVENUE N.  
SEMINOLE, FL. 33778

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

26 day of August, 19 98

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

x Mary Taylor  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not  
constitute the designation of officers.**

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 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

1. The name of the corporation is:

STORK DELIVERIES PLUS, INC.

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

Accounting & Tax Help, INC.  
(Name)

8668 PARK BLVD., Suite A  
(P.O. Box not acceptable)

SEMINOLE, Florida 33777  
(City/State/Zip)

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*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.*

Al Clark DATE 8-27-98  
(Signature)  
PRESIDENT

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

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