# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

49800008	32342
abrina van Lines, Inc.	5000026468367 -09/29/9801006016 ******70.00 ******70.00
Signature	Art of Inc. File  LTD Partnership File  Foreign Corp. File  L.C. File  Fictitious Name File  Fictitious Name File  Trade/Service Mark  Merger File  Art. of Amend. File  Partnership File  Art. of Amend. File  RA Resignation  Dissolution / Withdrawal  Annual Report / Reinstatement  Cert. Copy  Photo Copy  Certificate of Good Standing  Certificate of Fictitious Name  Corp Record Search  Officer Search  Fictitious Owner Search  Vehicle Search  Vehicle Search
Requested by: 9/23/98 9:51  Name Date Time  Walk-In Will Pick Up	Fictitious Owner Search  Vehicle Search  Driving Record  UCC 1 or 3 File  UCC 11 Search  UCC 11 Retrieval  Courier  R. Purinture SEP 2 3 1998

## ARTICLES OF INCORPORATION

of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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Sabrina Var	1.000	5:41	Digit of Carrio	111
	ame of corporation)	<i>ye</i> .	8 SEP 23 AM	9:
The undersigned subscriber(s) to these Articles of Is corporation under the laws of the State of Florida		son(s) competent to contr	ract, hereby form a	L
ARTICLE	I - CORPORATE NAM	ME		
The name of the corporation is:	Van Vines	Inc'	10 pt 10	
ARTI	CLE II - DURATION			
This corporation shall exist perpetually unless dis	ssolved according to Flo	rida law.		
ARTI	CLE III - PURPOSE			
The corporation is organized for the purpose of en United States and the State of Florida.	igaging in any activities o	r business permitted und	ler the laws of the	
	E IV - CAPITAL STOC			
The corporation is authorized to issue Five F	tundred shares	( 500 ) of <u>Ons</u>	2	
Dollar(s) (\$ /.00 ) par value Co	ommon Stock, which sha	all be designated "Comm	ion Shares."	
ARTICLE V - INITIAL	REGISTERED OFFICE	E AND AGENT		
The principal office, if known, or the mailing ad	ress of the corporation	is:		_
AME Porothy Cyriacks				_
DDRESS 3185 Dogwood Lan				
My Margate	FLORIDA	A	ZIP <i>33</i> 063	
The name and street address of the Initial Regis	stered Agent of this Cor	poration is:		_
AME Dorothy Cyriacks				
DDRESS 3185 Dogwood Cane				_
TTY Mercete	FLORIDA		ZIP 33663	
	IITIAL BOARD OF DII	RECTORS		
This corporation shall have( increased or diminished from time to time by the addresses of the initial director(s) of the corpora	By-Laws, but shall neve	ly. The number of directer be less than one (1).	tors may be either The names and	
AME Dorothy Cyclacks				
DDRESS 3185 Dayson Lane				
Marete	STATE	FI	ZIP 33063	_
AME .				
DDRESS				
ITY	STATE		ZIP	
AME				
DDRESS				

STATE

ZIP

### ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

AME Dorothy Cyriacks		
DIRESS 3185 Dogwood Lane		
Margate Margate	STATE F(.	ZIP 33063
ME		*
DDRESS		
IY	STATE	ZIP
ME		
DDRESS .		
TY	STATE	ZIP
N WITNESS WHEREOF, the undersigned subscribe lay of Sept , 1998.	Booney sinc	(Seal)
		(Seal)
STATE OF FLORIDA ) SS	•	
COUNTY OF Broward		
pefore me, a Notary Public authorized to take acknot appeared  Decethy Cyriacks	wledgements in the State and County	y set forth above, personally
known to me and known to be the person(s) whacknowledged before me that execute	no executed the foregoing Articles ed these Articles of Incorporation.	of Incorporation, and who
IN WITNESS WHEREOF, I have hereunto affixed m day of, 19 <u>98</u> .	y hand and seal, in the State and Coun	aty aforesaid, this 18
	Commission expires:	MAL NOTARY SEAL MELYN M MALONE MISSION NUMBER CC505644 COMMISSION EXP. DCT. 25,1999

# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

OF

Sabrina Vantines, INC

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 3185 Dogwood Lane

has named Dorothy Cyriacks

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

#### **ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)