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CAMPOS & COMPANY, P.A.  
15327 NW 60<sup>th</sup> Avenue  
Suite 210  
Miami Lakes, FL 33014  
(305) 826-4181

Fax: (305) 826-9036

October 20, 1998

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-11/02/98--01001--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Division of Corporation  
Attn: New Filing Dept.  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed please find the Articles of Corporation of SAMI ENTERPRISES, INC. and  
filing fees in the amount of \$122.50.

Should you need any other information, please contact me at (305) 826-4181.

Sincerely,

  
Mario Campos

called

Dmc

10/27/98

~~10/28/98~~

FILED  
98 OCT 30 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
**OF**  
**SAMI DELUXE, INC..**

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**FILED**  
98 OCT 30 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WE, THE UNDERSIGNED INCORPORATORS, HEREBY ASSOCIATE  
OURSELVES TOGETHER FOR THE PURPOSE OF BECOMING A CORPORATION  
UNDER THE LAWS OF THE STATE OF FLORIDA, PROVIDING THE  
PROVISIONS OF THE STATUTES OF THE STATE OF FLORIDA, PROVIDING  
THE INFORMATION, LIABILITIES, RIGHTS, PRIVILEGES AND IMMUNITIES OF  
CORPORATION FOR PROFIT.

**ARTICLE I**

THE NAME OF THIS CORPORATION SHALL BE:

**SAMI DELUXE, INC.**

**ARTICLE II**

THE CORPORATION MAY ENGAGE IN ACTIVITY OR BUSINESS PERMITTED  
UNDER THE LAWS OF THE STATE OF FLORIDA AND THE UNITED STATES.

**ARTICLE III**

THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THIS CORPORATION  
IS AUTHORIZED TO HAVE OUTSTANDINGS AT ANY TIME SHALL BE AS  
FOLLOWS:

ONE HUNDRED SHARES, AT \$ 10.00 PAR VALUE, COMMON STOCK.

THE SUBSCRIBING STOCKHOLDERS ARE AS FOLLOWS:

<u>NAME</u>	<u>SHARES</u>
DORA M. MERCHOT	99
LORENA S. SCARMATO	1

THE ENTIRE VOTING POWER OF THE CORPORATION SHALL BE VESTED AND BE ENTITLED TO ONE VOTE, AS SHALL BE MORE FULLY SET FORTH AND DETERMINED IN THE BY-LAWS OF THIS CORPORATION.

#### ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION SHALL BEGIN BUSINESS SHALL BE NO LESS THAN \$ 1,000.00.

#### ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE.

#### ARTICLE VI

THE CORPORATION STREET ADDRESS OF THE OFFICE OF THIS CORPORATION SHALL BE:

10010 S.W. 213 TERR.  
MIAMI, FLORIDA 33189

#### ARTICLE VII

THE NUMBERS OF DIRECTORS SHALL NOT BE LESS THAN ONE ( 1) AND NOT MORE THAN THREE (3).

**ARTICLE VIII**

THE RESIDENT AGENT OF THE CORPORATION OF ACCEPTANCE OF SERVICE OF PROCESS WITHIN FLORIDA SHALL BE:

DORA M. MERCHOT  
10010 S.W. 213 TERR.  
MIAMI, FLORIDA 33189

**ARTICLE IX**

THE NAME STREET ADDRESS OF THE FIRST DIRECTORS WHO, SUBJECT TO THE PROVISIONS OF THE CERTIFICATE OF INCORPORATION, THE BY-LAWS AND THE YEAR OF THE CORPORATION'S EXISTENCE, OR UNTIL THEIR SUCCESORS ARE ELECTED AND HAVE QUALIFIED ARE:

DORA M. MERCHOT  
10010 S.W. 213 TERR.  
MIAMI, FLORIDA 33189

LORENA S. SCARMATO  
10010 S.W. 213 TERR.  
MIAMI, FLORIDA 33189

**ARTICLE X**

THE NAME AND ADDRESSES OF THE INCORPORATORS ARE:

DORA M. MERCHOT  
10010 S.W. 213 TERR.  
MIAMI, FLORIDA 33189

LORENA S. SCARMATO  
10010 S.W. 213 TERR.  
MIAMI, FLORIDA 33189

**ARTICLE XI**

THE CORPORATION SHALL HAVE THE RIGHT AND POWER TO: FROM TIME TO TIME DETERMINE WHETHER AND TO WHAT EXTENT AND AT WHAT TIMES AND PLACES AND UNDER WHAT CONDITIONS AND REGULATIONS, THE ACCOUNTS AND BOOKS OF THIS CORPORATION BE OPEN TO INSPECTION BY STATUTE, UNLESS AUTHORIZED BY A RESOLUTION OF THE BOARD OF DIRECTORS. THE CORPORATION MAY IN ITS BY -LAWS CONFER POWERS UPON ITS BOARD

OF DIRECTORS OR OFFICERS, IN ADDITION TO THE FOREGOING AND IN ADDITION TO POWERS AUTHORIZED AND EXPRESSLY CONFERRED BY STATUTE. IF THE BY-LAWS SO PROVIDE TO HOLD THEIR RESPECTIVE MEETINGS, AND TO HAVE ONE OR MORE OFFICES WITHIN THE STATE OF FLORIDA. THE CORPORATION RESERVES THE RIGHT TO AMEND , ALTER, CHANGE OR REPEAL ANY PROVISION CONTAINED IN THIS CERTIFICATE OF INCORPORATION, IN THE MANNER NOW OR HEREAFTER DESCRIBED AND PRESCRIBED BY STATUTE.

#### ARTICLE XII

THIS CORPORATION SHALL HAVE THREE DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DIMINISHED FROM TIME TO TIME BY THE BY-LAWS.

THE NAME AND ADDRESSES OF THE INITIAL DIRECTORS OF THIS CORPORATION ARE:

PRESIDENT	DORA M. MERCHOT 10010 S.W. 213 TERR. MIAMI, FLORIDA 33189
VICE-PRESIDENT-TREASURER	DORA M. MERCHOT 10010 SW 213 TERR. MIAMI, FLORIDA 33189
SECRETARY	LORENA S. SCARMATO 10010 S.W. 213 TERR. MIAMI, FLORIDA 33175

WE THE UNDERSIGNED, BEING ALL OF THE ORIGINAL INCORPORATORS HEREINABOVE NAMED FOR PROFIT CORPORATION TO DO BUSINESS BOTH WITHIN AND WITHOUT THE STATE OF FLORIDA, DO HEREBY MAKE, ACKNOWLEDGE AND FILE THIS CERTIFICATE, HEREBY DECLARING AND CERTIFYING THAT THE FACTS HEREIN STATED ARE TRUE.

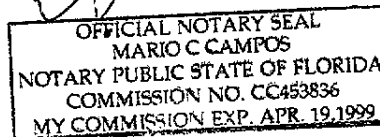
*Dora M. Merchot*  
DORA M. MERCHOT  
PRESIDENT

*Dora M. Merchot*  
DORA M. MERCHOT  
VICE-PRESIDENT  
*Lorena S. Scarmato*  
LORENA S. SCARMATO  
SECRETARY

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared DORA M. MERCHOT, known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and they acknowledge before me that they executed those Articles of Incorporation.

*Dora M. Merchot*  
DORA M. MERCHOT  
PRESIDENT

*Lorena S. Scarmato*  
LORENA S. SCARMATO  
SECRETARY



**CERTIFICATE OF DESIGNATION**

**REGISTER AGENT/ REGISTERED OFFICE**

**FILED**  
98 OCT 30 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

**DELUXE, INC.**

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

**DORA M. MERCHOT  
10010 S.W. 213 TERR..  
MIAMI, FLORIDA 33189**

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.

*Dora M. Merchot*  
**DORA M. MERCHOT**

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED MY OFFICIAL SEAL IN THE STATE AND COUNTY AFORESAID, THIS 27TH. DAY OF MAY 1998.

*[Signature]*  
**NOTARY PUBLIC, STATE OF FLORIDA**

My Commission Expires:

