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SECRETARY OF STATE TALLAHASSEE, FLOMDA

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

SUBJECT:	LIAD INTER	NATIONAL Co rate name - must include suf	2. fix)	
		3	00002692 -11/20/98 ****131.25	24438 01021006 *****87.50
Enclosed is an original a	and one(1) copy of the articles	of incorporation and a c	theck for :	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	ADAM ROSS	inted or typed)	#1.4 <u> </u>	
-	4000 TOWE	RSIDE TERRAC	<u>s. 1504</u>	.
–	MIAMI FL City, S	33138 State & Zip		10 N 10 N 10 N
_		DO12 dephone number NOV 2 4 1998		•

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

FILED

ARTICLES OF INCORPORATION

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

SECRETARY OF STATE TALLAMASULE, FLUMBA

ARTICLE I NAMI	NAME	<u></u>	E	ricl	4 R'	,
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The name of the corporation shall be:

LIAD INTERNATIONAL CO.

ARTICLE II PRINCIPAL OFFICE

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

4000 TOWERSIDE TERRACE S. 1504 MIAMI FL 33/38

ARTICLE III SHARES

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

1000

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

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

ADAM ROSS 4000 TOWERSIDE TENNACE 5.1504 MIAMI FL 33/38

INCORPORATOR ARTICLE V

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

ADAM ROSS 4000 Towerside Terrace MIAMI FL 33138

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