# S POOD O O 423 PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

(((H98000022434 8)))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: KARPATY EXPORT AND IMPORT, INC.

AUDIT NUMBER...... H98000022434

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

CERT. OF STATUS...0
CERT. COPIES.....1

PAGES..... 4

DEL METHOD. FAX

EST.CHARGE., \$78.75

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>: Help F1 Option Menu F2

NUM Connect: 00:03:35

98 DEC -2 PN 3-21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mer of the



### H-10000022434

#### ARTICLES OF INCORPORATION

OF

#### KARPATY EXPORT AND IMPORT, INC.

These Articles are in compliance with Chapter 607 F. S.O.

#### Article I

The name of this corporation shall be:

KARPATY EXPORT AND IMPORT, INC.



#### Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

#### Article III

The principal place of business and mailing address of this corporation shall be:2671 E. SARATOGA DR.

COOPER CITY, FL 33026

#### Article IV

The general nature of business of this corporation is to transact any and all lawful business.

#### Article V

The number of shares which this corporation shall have authority to issue is 1,000 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### Article VI

The name and street address of the initial Registered Agent of this corporation shall be: MITCHELL J. OLIN, ESQ.
1290 E. OAKLAND PARK BLVD., SUITE 101
FT. LAUDERDALE, FL 33021

PREPARED BY: RAY STORMONT, EMPIRE CORPORATE KIT COMPANY, 1492 WEST FLAGLER STREET, #200, MIAMI, FL 33135, (305) 541-3694

+198000022434

-H-80000022434

#### Article VII

The initial board of Directors shall consist of a total of 4 person(s) and the name and address of the person(s) who are to serve as an initial director(s)

JOHN IWASKIEWYCH PRESIDENT

2671 E. SARATOGA DR. COOPER CITY, FL 33026

DANIEL IWASKIEWYCH VICE PRESIDENT

2671 E. SARATOGA DR. COOPER CITY, FL 33026

OLGA IWASKIEWYCH SECRETARY

2671 E. SARATOGA DR. COOPER CITY, FL 33026

PETER IWASKIEWYCH TREASURE

2671 E. SARATOGA DR. COOPER CITY, FL 33026

#### Article VIII

The name and address of the incorporator executing these Articles of Incorporation is:

> EMPIRE CORPORATE KIT OF AMERICA, INC. 1492 WEST FLAGLER STREET #200 MIAMI, FL 33135

The undersigned has executed these Articles of Incorporation this \_\_\_\_\_\_\_ day of \_\_DECEMBER\_\_,1998.

**Yncorporator** 

Ray Stormont, President
Signing for
Empire Corporate Kit of America, Inc.

....

## H98000022434

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501. Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, aubmits, organized under the statement in designating the registered office/registered agent, in the state of Florida.

	sistered officerio	<del></del>		
fitte Trea	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	LA DATE Y LEXIO	RT AND IMPOR	T,
Pi	irst thatK	(Name of Cox	poration)	FLORIDA
	ng to organize und	er the laws o	f the State or .	(Florida)
desirir	và to ordanize an-			les of
	1 mefic	e, as indicat	ted fir the grant	
with 11	ce brincales	ALTENEIL.	J. OLIN, ESCL.	
i wentti	oration has named	132 mm (32 mm)	of Registered A	ent)
Title on E.		CALCAMA PAN	L BLVD SUITE	101
located	d at	)	On 41150	٨
		County	of BROWAR	tv)
City o	f FT. LAVA (City)			•
•	(2203)		is asserted of	process within

State of Florida, as its agent to accept service of process within this state.

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 THE 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

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

hersecoopert