ANSMITTAL NET Department of State **Division of Corporations** P. O. Box 6327 800002699808--0 Tallahassee, FL 32314 -12/02/98--01018--014 *****78.75 *****78.75 Du-Ane Super SUBJECT: nc (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **⊠** \$78.75 \$70.00 □\$122.50 **\$131.25** Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED horna V. Washington FROM: Name (Printed or typed) 15331 NW28 Alace Address Miami, 7 AH 7: 56 City, State & Zip 305-577-2570 Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Du-Ane Superior Investments, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 15331, NW 26746MIAMI, 71 33054

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Five hundred shares (500) of \$1.00 per common stock vale

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lorna V. Washington 15331 NW 28 M Place Miami, 71 33054

ARTICLE V INCORPORATOR

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

1. Washington horna ane F. Mallar 5331 NW 28 Plac Signature/Incorporator une

(An additional article must be added if an effective date is requested \mathcal{N}

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

J

