

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H99000002721 1)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)541-3694

Fax Number

: (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

arnholt inc.

20 (20 mm m m m m m m m m m m m m m m m m m	Section 2012 Section 2015 Secti
Certificate of Status	0
Certified Copy	
Page Count	***
Estimated Charge	\$78.75

1 of 2

/2/3/99 11:17 AM

EMPIRE CORPORATE KIT



H9900000000191

CERTIFICATE OF INCORPORATION OF ARNHOLT INC.

ARTICLE I

The name of this corporation shall be: ARNHOLT INC.

ARTICLE II

This corporation may engage in any activity or business permitted under the laws of the United States of America and of the State of Florida.

ARTICLE III

The maximum number of shares of stock that this corporation is an horized to have outstanding at any time is 100 at \$1.00 PAR VALUE each.

ARTICLE IV

This corporation is to have perpetual existence.

ARTICLE V

The principal office of this corporation shall be located at: 649 Curtiswood Drive. Key Biscayne, Florida 33149, with the corporation retaining the power of moving its office to any other address in Florida, as may from time to time be determined and authorized by its Board of Directors.

This instrument was prepared by:

.A. Rosemary Sala, Esq.
328 Crandon Blvd. Suite 202
Key Biscayne, Florida 33149
Florida Bar No. 0494380
(305) 36 (-0105

99 FEB -3 PM 1: 1 SECRETARY OF STATE TALLAHASSEE, FLORIDA

H99000002721

H99000000000

ARTICLE VI

This corporation shall at all times have at least one Director who shall conduct the business of the corporation as a Board of Directors. The stockholders of the corporation may, from time to time, and at any time, increase or diminish the size of the Ecard of Directors of the corporation, provided that the corporation shall at all times have a minimum of one Director.

ARTICLE VII

The names and post office addressed of the First Board of Directors of the corporation who subject to the provisions of the Certificate of Incorporation and the corporation laws of the State of Florida shall hold office for the first year of the corporation's existence, or until their successors are elected and qualified are:

JOHN ARNHOLT

649 Curtiswood Drive Key Biscayne, FL 33149

The registered agent shall be A. Rosemary Sala, and the registered office shall be at 260 Crandon Blvd., Suite 14, Key Biscayne, FL 33149.

ARTICLE VILL

The name and post office address of the subscriber to this Certificate of Incorporation, is:

JOHN ARNHOLT 649 Curtiswood Drive Key Biscayne, FL 33149

The By-Laws of this corporation may be created, amended or changed by either the Stockholders or the Directors of the corporation at any regular or duly scheduled Special Meeting.

ARTICLE IX

All officers, agent and factors shall be chosen in such manner, hold their office for such terms and have such powers and duties as may be prescribed by the By-Laws or determined by the Board of Directors of the corporation.

H99000002721

199000000000

ARTICLE X

Every person who now is or hereafter shall become a Director of this corporation shall be indemnified by the corporation against all costs and expenses (including counsel fees) hereafter reasonably incurred by or imposed upon him in connection with, or resulting from, any action, suit or proceeding, or at the time such cost or expense is incurred by or imposed upon him. However, an exception is made to the above in relation to matters as to which he shall be finally edjudged in such action, suit of proceeding to have been derelict in the performance of such duties imposed in him as such Director.

The right to indemnification herein provided shall not be exclusive of other rights to which any such person may now or hereafter be entitled as a matter of law.

I, the undersigned, do hereby subscribe, acknowledge and file this Certificate of Incorporation, hereby certifying that the fact herein stated are true and correct, and according hereto set my hand and seal this 3 / day of January, 1999.

OHN ARNHOLT (SEAL)

STATE OF FLORIDA

COUNTY OF DADE

59:

Be it remembered that on this 3/ day of January, 1999, personally appeared before me, a Notary Public for the State of Florida, JOHN ARNHOLT, party to the foregoing Certificate of Incorporation, known to me personally to be such, and they acknowledged the said Certificate of Incorporation to be the act and deed of the signer, and that the facts therein stated are truly set forth.

Given under my hand and seal of office the day and year aforesaid.

asternot of work

Notary Public, State of Florada at Large

My commission expires:

OFFICIAL NOTARY SEAL CRESTINA ARECHABALA NOTARY PUBLIC STATE OF FLORIDA COMMESSION NO. CCS29324 MYCOMMISSION EXP. MAR. 12,2001

Hag 000002721

3

H99000000791

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITE SECTION 48.091, PLORIDA STATUTES, THIS FOLLOWING IS SUBMITTED:

FIRST--THAT ARNHOLT INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF MIAMI, STATE OF FLORIDA, HAS NAMED A. ROSEMARY SALA, LOCATED AT 260 CRANDON BLVD., SUITE 14, KBY BISCAYNE, FL 33149, CITY OF KEY BISCAYNE, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Signature

CORPORATE OFFICER)

Title: bifector

Date: January 3/ , 1999

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Signature:

Date: January 3/ 1. 1

99 FEB -3 PN 1: 1
SECRETARY OF STATE

H99000002721