Division of Corporations

# 0017431

### Florida Department of State

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

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

Phone : (305)599-0839

Fax Number

: (305)716-0346

### FLORIDA PROFIT CORPORATION OR P.A.

### ISLA SPORTSWEAR, INC.

TRANSLATION: ISLAND SPORTSWEAR, INC.

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Certificate of Status	0							
Certified Copy	1							
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# ARTICLES OF INCORPORATION SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

ISLA SPORTSWEAR , INC.

#### ARTICLE II PRINCIPAL OFFICE

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

5214 NW 198 TERRACE : MIAMI . PL 33055

The mailing address of this corporation shall be:

P.O. BOX 172108 ; HIALEAH , FL, 33017-2108

### ARTICLE III SHARES

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

ONE HUNDRED AND TWENTY SHARES ONE DOLLAR PAR VALUE

Prepared by: Pedro M. Ramos, CPA 554 Bast 9 Street #A Hialeah, FL 33010 (105)885-9435

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is: HECTOR I. SANTOS 5214 NW 198 TERRACE ; MIAMI , PL. 33055 INCORPORATOR (S) ARTICLE V See instructions for officers / directors The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): HECTOR I. SANTOS 5214 NW 198 TERRACE MIAMI , FL. 33055 The undersigned incorporator(s) has(have) executed these Articles of Incorporation this \_\_\_\_\_ day of FEBRUARY\_ 1999. Signature

Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

# CERTIFICATE OF DESIGNATION OF 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, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REJISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

ISLA SPORTSWEAR , INC.

_										
2.	The	name	and	address	of the	registereā	agent	anđ	office i	នេះ
					HECTOR	I. SANTOS			_	
			····		- (1	Name)	···········			<u> </u>
				5	5214 NW	198 TERRACE	3			
			(P	.O. Box	or Mail	Drop NOT a	cceptal	ole)	<u> </u>	
					MIAMI,	FL 33055				

## (City / State / Zip)

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.

Set Signature)

FEBRUARY 20.

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL.

STATE FLORIDA