ZARUS CORPORATE FILING SERVICE, (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Photocopy.... Certificate of Status 900002 NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILNGS REGISTRATION/ QUALIFICATION **Annual Report** Foreign Fictitious Name, mited Partnership Name Reservation Reinstaten Tradema Øther: Examiner's Initials CR2E031(9/92)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 19, 1999

LAZARUS

MIAMI, FL

SUBJECT: MIAMI GRAPHIC DESIGN, CORP.

Ref. Number: W99000004297

We have received your document for MIAMI GRAPHIC DESIGN, CORP.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with acopy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 399A00007731

ARTICLES OF INCORPORATION

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 | NAME

The name of the corporation shall be:

IRIS GRAPHIC DESIGN, COIP.

99 FEB 25 PH 1: 36
SEGRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

12202 SW 131 AVE. MIAMI' FL

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

NELLY PERSAUD, AUE, MIAMI FL

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

NELLY PERSAUD,

122 02 SW. 131 AVE. MIAN; II.

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are): 29 A Color Dresident. 33.3% Incorporation is(are): 29 A Color Dresident. 33.3% Incorporation is(are): 20 President. 33.3% Incorporation is are address(es) of the director(s) to these Articles of Incorporation is(are): 23.3% Incorporation is(are): 23.3% Incorporation is(are): 23.3% Incorporation is(are): 23.3% Incorporation is(are): 24.3% Incorporation

Signature

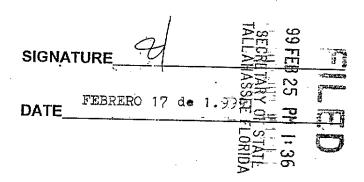
Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is:	IRIS GRAPHIC DESIGN COCP.
The name and address of the regi	stered agent and office is:
NELLY PERSAUD	
	AME)
(P.O. BOX <u>NO</u>	[ACCEPTABLE)
MIAMI, FL.	
(CITY/S	TATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PLOCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS RECISTERED 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 L'AMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS LEGISTERED AGENT.



REGISTERED AGENT FILING FEE: \$35.00