Division of Corporations

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Florida Department of State

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Account Name : LEVINE & SEGAUL, P.A.

Account Number : I19980000083

Phone

: (954)749-6705

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FLORIDA PROFIT CORPORATION OR P.A

Sipco, Inc.

Certificate of Status	1
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Corporate Filings

PAGE: 002/004

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ARTICLES OF INCORPORATION

OF

SIPCO, INC.

Article I - Name

The name of the corporation shall be: SIPCO, INC.

Article II - Principal Office

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

649 NW 135 Terrace Plantation, FL 33325

Article III - Capital Stock

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

Article IV - Registered Agent

Levine & Segaul, P.A. Suite A-106 4300 N. University Drive Fort Lauderdale, FL 33351

This document prepared by: Lawrence A. Levine - Fla. Bar 193185 LEVINE & SEGAUL, P.A. 4300 N. University Drive - A-106 Fort Lauderdale, FL 33351 Tel (954) 749-6705 Fax (954 749-6759 TALLAHASSEE, FLORIG

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Article V - Effective Date

These Articles of Incorporation shall be effective immediately upon execution.

Article VI - Incorporator

The name and street address of the incorporator of this Corporation is:

Adnan Kabbara 649 NW 135 Terrace Plantation, FL 33325

The undersigned has executed these Articles of Incorporation on April 5, 1999.

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT

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 registered agent, in the State of Florida.

The name of the corporation is: 1.

SIPCO, INC.

The name of the registered agent is: Levine & Segaul, P.A. 2.

Suite A-106 4300 N. University Drive Fort Lauderdale, FL 33351

Signature:

Lawre

Date:

Apríl 5, 1999

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 THE AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature:

Lawrence

Date:

April 5/1999

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