P99000033130

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

600002831686--1 -04/07/99--01015--005 *****87.50 *****87.50

SUBJECT: Ecstasy Embroidery, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee

\$78.75 Filing Fee &

Certificate of

Status

□\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fcc,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: <u>Shirley Riettie</u>

Name (Printed or typed)

17950 N.W. 22nd Court

Address

Miami, Florida 33056

City, State & Zip

305-625-8268

Daytime Telephone number

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

n 4/12/99

ARTICLES OF INCORPORATION OF ECSTASY EMBROIDERY, INC.

FILED 99 APR -7 PM 1: 53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

ONE:

The name of this principal corporation is Ecstasy Embroidery, Inc.

The corporation is organized pursuant to Chapter 607 or 621 of the Florida

Statues for profit Corporations.

TWO:

The principal place of business and mailing address of the corporation is 17950

N.W. 22nd Court Miami, Florida 33056 in Dade County, Florida.

THREE:

The number of shares of stock that this corporation is authorized to have

outstanding at one time is 33 1/3.

FOUR:

The name and address of the Registered Agent is Shirley Riettie: 17950 N.W.

22nd Court Miami, Florida 33056.

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 statues relating to the complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date

FIVE:

SIX:

The Directors are elected in accordance with the Bylaws. The name and address of the persons appointed to act as the initial Directors of this corporation are:

NAME

ADDRESS

Shirley Riettie

17950 N.W. 22nd CT.

President

Miami, FL. 33056

Marjorie Moore

13031 N.W. 1st Street #210

Secretary

Pembroke Pines, FL. 33028

Regina Mason

75 N.E 150th Street

Treasurer

North Miami, FL. 33161

1100

Executed on March 26, 1999. The name and address of the

incorporator of this corporation shall be:

Shirley Rietie

17950 N.W. 22nd CT.

Miami, FL. 33056

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 REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the	e corporation is:Ecstasy Embroidery, Inc.		
2. The name and	address of the registered agent and office is:	99	-
	Shirley Riettie (NAME) (NAME)	APR -7:1	
	17950 N.W. 22nd Court (P.O. Box or Mail Drop Box NOT Acceptable)	₩ :: 53	U
	Miami, Florida 33056		

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 appointments 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.

(CTTY/STATE/ZIP)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL. 32314