

TRANSMITTAL LETTER

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

P 990000 38113

600002847346--4

-04/22/99-01059-020

*****78.75 *****78.75

SUBJECT:

UNI-FUN WEAR 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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Guilene M. Dixon

Name (Printed or typed)

3600 S STATE RD 7 Suite #200

Address

MIRAMAR, FL 33023

City, State & Zip

(954) 983-6965

Daytime Telephone number

FILED
APR 22 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. CHESSEB APR 2 / 1999

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

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: UNI-FUN WEAR, INC.

ARTICLE II PRINCIPAL OFFICE

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

3600 S. STATE RD 7, SUITE #210
MIRAMAR, FL 33023

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

NICOLE DIXON
1505 N.W. 203 STREET
MIAMI, FL 33169

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Guilene Dixon
1505 N.W. 203 STREET
MIAMI, FL 33169

Guilene M. Dixon

Signature/Incorporator

4-7-99

Date

(An additional article must be added if an effective date is requested.)

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.

[Signature]
Signature/Registered Agent

4-7-99

Date

99 APR 22 PM 3:20

FILED

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TALLAHASSEE, FLORIDA