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(Requestor's Name)	-04/12/9901075014
3320 S.W. 87th AVENUE	*****78.75 *****78.75
(Address)	
MIAMI, FLORIDA (305)552-5973	
(City, State, Zip) (Phone #)	
LOCAL REPRESENTATIVE TALLAHASSE	E OFFICE USE ONLY
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CORPORATION NAME(S) & DOC	UMENT NUMBER(S) (if known):
1. SS ENTERPRI	ISES, TNC. (Document #)
2.	
(Corporation Name)	(Document #)
3.	
(Corporation Name)	(Document #)
4	
(Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy ACCRETATION Certificate of Status ACCRETATION ACCRE
Mail out Will wait	Photocopy Certificate of Status
	No. 20 Sept. 1
NEW FILINGS	AMENDMENTS FLORIDA 33
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
. Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
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OTHER FILINGS	REGISTRATION/
Annual Report	QUARTICATION A
Fictitious Name	Foreign
Name Reservation	Limited Partnership \ Reinstatement
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	Other Examiner's Initials

CR2E031(9/92)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 12, 1999

LAZARUS

MIAMI, FL

SUBJECT: SS ENTERPRISES, INC.

Ref. Number: W99000008615

We have received your document for SS ENTERPRISES, INC.. 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 a copy 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: 799A00018308

66 WK - 9 LK 3: 08

99 MAY -6 PM 3: 30 SECRETARY OF STATE TALLAHASSEE FLORIDA

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 1 NAME

The name of the corporation shall be:

SS SPECIALTIES, INC.

ARTICLE II PRINCIPAL OFFICE

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

Principal Place of Business 7464 NW 8 Street Miami, Florida 33126 Mailing Address 9500 SW 164 Ct Miami, Florida 33196

ARTICLE III SHARES

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

Sree V. Mondraty, 500 Shares

Umasankar Dasari, 500 Shares

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sree V. Mondraty 9705 Fountainbleu Blvd. Apt #211 Miami, Florida 33172

ARTICLE V INCORPORATOR(S)

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

Sree V. Mondraty, President 9705 Fountainbleu Blvd. Apt #211 Miami, Florida 33172

Umasankar Dasari, President 9500 SW 164th Ct. Miami, Florida 33172

ARTICLE VI DIRECTOR(S)

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

Sree V. Mondraty, President 9705 Fountainbleu Blvd. Apt #211 Miami, Florida 33172 Umasankar Dasari, President 9500 SW 164th Ct. Miami, Florida 33172

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 8th day of April, 1999.

Signature-Sree V. Mondraty, Pres.

Signature-Umasankar Dasari, Pres.

<u>CERTIFICATE OF DESIGNATION</u> 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.

1. The name of the corporation is:
SS SPECIALTIES, INC.
The name and address of the registered agent and office is:
Sree V. Mondraty
(NAME)
9705 Fountainbleu Blvd., Apt# 211
(P.O. BOX <u>NOT</u> ACCEPTABLE)
Miami, Florida 33172
(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.

DATE DU/08/99 LLLAHASSEE FLORIDA