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To:

Division of Corporations

Fax Number

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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335
Phone: (305)599-0839

Fax Number : (305)716-0346

99 MAY 20 PM 1: 39 SECRETARY OF STATE: ALL MINSSEE EL COMA

FLORIDA PROFIT CORPORATION OR P.A.

SUNEE CORPORATION

chaided

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 20, 1999

FAS-T CORP

SUBJECT: SUNEE CORPORATION

REF: W99000011794

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Freida Chesser Corporate Specialist

FAX Aud. #: H99000012044 Letter Number: 799A00027891

ARTICLES OF INCORPORATION

OF

SUNEE CHAIDED CORPORATION

The undersigned subscriber to these Articles of Incorporation, a natural person, competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I.

NAME

The name of the corporation shall be:

SUNEE CHAIDED CORPORATION

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SECKETARY OF STATE
TALLAMASSEE, FLORIDA

ARTICLE II.

GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE III

CAPITAL STOCK

A. The total authorized capital stock of this Corporation is five hundred (500) shares of Common Stock, par value \$1.00 per share.

Prepared By: Bruttell Tax service 209 NW 16 Street Pompano Beach, Florida 33060 (954)-946-8011

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B. Every shareholder, upon the sale for cash of any new stock of this Corporation of the same kind, class or series as that which he/she already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE IV

TERMS OF EXISTENCE

This Corporation shall exist perpetually.

ARTICLE V

ADDRESS OF PRINCIPAL OFFICE IN THIS STATE

The initial street and mailing address of the principal office of this Corporation in the State of Florida is:

85 Plantation Boulevard, Lake Worth, Fl 33467, Directors may from time to time move the principal office to another address in Florida.

ARTICLE VI

NUMBER OF DIRECTORS

This Corporation shall have not less than one (1) Director.

ARTICLE VII

FIRST BOARD OF DIRECTORS

The name and street address of the initial member of the Board of Directors is:

Sunee Pinta Chaided 85 Plantation Boulevard Lake Worth, Fl 33467

ARTICLE VIII

INCORPORATOR

The name and street address of the Incorporator of the Articles of Incorporation is:

Sunee Pinta Chaided 85 Plantation Boulevard Lake Worth, Fl 33467

ARTICLE IX

INITIAL OFFICE AND REGISTERED AGENT

The name and street address of of the initial registered agent and the office of the Corporation is:

Summe Pinta Chaided 85 Plantation Boulevard Lake Worth, Fl 33467

IN 1	Witness	WHE	REOF,	I	have	hereunto	set	my	hand	and	seal	this
	da	y of		7.	17	,	199_	<u> 1</u> .				

Sunee Pinta Chaided, Incorporator

CERTIFICATE DESIGNATION

AS

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statues, 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:

SUNEE CHAIDED CORPORATION

2. The name and address of the registered agent is: Sunee Pinta Chaided 85 Plantation Boulevard Lake Worth, Fl 33467

99 MAY 20 PM 1: 39 SECRLIAN OF STATE TALLAHASSEE, FLORIDA

ACKNOWLEDGEMENT:

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.

Sunee Pinta Chaided, Registered Agent

| 18 | May | 1999.