PHONE NO.: 7273975189

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Division of Corporations

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Account Name : AL CLARK Account Number: 072100000173 Phone (727) 398-6011 Fax Number

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## FLORIDA PROFIT CORPORATION OR P.A

FLEX - DEX INTERNATIONAL, INC.

Certificate of Status	0
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## 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 I NAME

The name of the corporation shall be

#### FLEX - DEX INTERNATIONAL, INC.

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SECRETARY OF STATE
SECRETARY OF STATE

#### ARTICLE II PRINCIPAL OFFICE

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

#### 503 SUMMERWOOD COURT TARPON SPRINGS, FL.34689

#### ARTICLE III SHARES

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

#### 1000 SHARES NO PAR

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: prepared by:

Name: ANN MARIE PARRILLO Address: 503 SUMMERWOOD COURT TARPON SPRINGS, FL.34689

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

PH # 727-942-0120

FROM : ACCOUNTING & TAX HELP INC. PHONE NO. : 7273975189 FROM: ACCOUNTING & TAX HELP INC. PHONE NO. : 7273975189

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Jun. 23 1999 11:00AM F2

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## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

> AnnMarie Parrillo 503 Summerwood Court Tarpon Springs, FL. 34689

The undersigned	incorpora	itor(s) has (have) e	xecuted these A	ticles of Incorp	poration this
28#	day of	June		99	
(An additi	onal artici	e must be added if	an effective date	is requested.)	
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<b>^</b> -c-	<u>ww c</u>	Signat	ure		
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		Signat	ure	to the state of th	

Notarization is not required

NOTE: Affixing an officer title ofter a signature of an incorporator does not constitute the designation of officers.

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:

### FLEX - DEX INTERNATIONAL, INC.

2. The name and address of the registered agent and office is:

Accounting & Tax Help, INC. (Name)

8668 PARK BLVD., Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (City/State/Zip) 99 JUN 29 AM IO: 37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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)

PRESIDENT

DATE 6-28-99

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

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