WOOD PRODUCTS, INC. BEST 6617 S.W. 113TH Ct. 99

Miami, Florida 33176

August 24, 1999

Corporate Records Division Division of Corporations Department of State P.O. Box 6327 Tallahassee, Fl. 32314

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RE: **BEST WOOD PRODUCTS, INC.**

Dear Sir/Madam:

Enclosed please find the original and one copy of the Articles of Incorporation for the above-captioned corporation, as well as Certificate of Resident Agent. Also enclosed is my check in the amount of \$122.50 to cover your respective fees. Please forward to me a certified copy of the Articles and Certificate of Incorporation.

Thank you for your cooperation in this matter.

Very truly yours, Rolando E. Cruz

REC/kc Encls.

ARTICLES OF INCORPORATION

OF

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BEST WOOD PRODUCTS, INC.

<u>ARTICLE I</u>

NAME

The name of this corporation is BEST WOOD PRODUCTS, Inc.

ARTICLE II

PURPOSE

This corporation is organized for the purpose of transacting any and all

lawful business authorized by the laws of the State of Florida.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue one hundred shares of \$.10 par value

common stock.

ARTICLE IV

PREEMPTIVE RIGHTS

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 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 V

INITIAL OFFICE, PRINCIPAL OFFICE AND AGENT

The street address of the initial registered office and principal office of this corporation is 10775 S.W. 190TH St., #21, Miami, Florida 33157 and the name of the initial registered agent of this corporation is Rolando Efrain Cruz.

ARTICLE VI

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INITIAL BOARD OF DIRECTORS

This corporation shall have three (2) directors initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one (1).

The names and addresses of the initial directors of this corporation are:

Quirino Cruz 10775 S.W. 190th St., #21 Miami, Florida 33157

Rolando Efrain Cruz 10775 S.W. 190th St., #21 Miami, Florida 33157

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ARTICLE VII

INCORPORATOR

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The name and address of the person signing these Articles is:

Quirino Cruz 10775 S.W. 190th St., #21 Miami, Florida 33157

<u>ARTICLE VIII</u>

AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this $\frac{24H}{2}$ day of August, 1999.

Quirino Cruz, Subscriber

STATE OF FLORIDA) SS: COUNTY OF DADE)

The foregoing Articles of Incorporation were acknowledged before me this

24// day of August, 1999 by QUIRINO CRUZ, JR. who is personally known to me

or who has produced a _____

as identification and

who did take an oath.

<u>Actia Calleiro Cruz</u> NOTARY PUBLIC (Signature)

<u>KATIA CALLEIRO CRUZ</u> Name Printed/Typed

My Commission Expires:

OFFICIAL NOTARY SEAL KATIA CALLEIRO CRUZ NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC587719

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT AMERICAN SPORTS PROMOTIONS, INC. DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF MIAMI, STATE OF FLORIDA HAS NAMED, ROLANDO EFRAIN CRUZ, LOCATED AT 10775 S.W. 190TH STREET, #21, CITY OF MIAMI, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNA	
	(Corporate Officer)
TITLE	John ling
DATE	Resident Agent/Vice President $\theta = 24 - 99$

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE	Jelunde	AUG RE	
(R	esident Agent)		
DATE	8-24-99	UALE ORIDA	