

Division of Corporations

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P99000078246**Florida Department of State**

Division of Corporations

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To:
Division of Corporations
Fax Number : (850) 922-4001

From:
Account Name : DAVID SILVERMAN, ESQ.
Account Number : I19990000080
Phone : (305) 947-5822
Fax Number : (305) 947-5823

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED**FLORIDA PROFIT CORPORATION OR P.A.****Rose Innovations, Inc.**

Certificate of Status	0
Certified Copy	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:

Rose Innovations, Inc.

ARTICLE II PRINCIPAL OFFICE

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

744 Spring Island Way
Orlando, Fl. 32828

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAVID SILVERMAN, ESQ.
1591 N.E. MIAMI GARDENS DR., #214A
NORTH MIAMI BEACH, FL 33179

Robert Rose
744 Spring Island Way
Orlando, Fl. 32828

(305) 947-5822
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ARTICLE V INCORPORATOR(S)

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

Robert Rose
744 Spring Island Way
Orlando, Fl. 32828

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30 day of August, 1999.

X 
Signature

Notarization is not required.

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ARTICLE VI DIRECTOR(S) OFFICER(S) SHAREHOLDER(S)

The name(s) and street address(es) of the director(s) are:

Robert Rose
744 Spring Island Way
Orlando, Fl. 32828

The name(s) and street addresses of the officer(s) are:

Robert Rose, President and Secretary
744 Spring Island Way
Orlando, Fl. 32828

The name(s) of the shareholder(s) are:

Robert Rose (100 shares)
744 Spring Island Way
Orlando, Fl. 32828

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

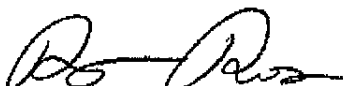
1. The name of the corporation is:

Rose Innovations, Inc.

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

Robert Rose
744 Spring Island Way
Orlando, Fl. 32828

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.

x  8/30/99
(Signature) (Date)

Notarization Is Not Required

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

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