Division of Corporations

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## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : THOMAS M. CLARK, P.A.

Account Number : 072100000445

Phone

: (954)776-3800

Fax Number

: (954)776-3825

## FLORIDA PROFIT CORPORATION OR P.A.

LIBERTY TATTOO SUPPLIES, INC.

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

B. McKnight SEP 0 2 1999

# ARTICLES OF INCORPORATION OF

## LIBERTY TATTOO SUPPLIES, INC.

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ARTICLE I - NAME

The name of this corporation is LIBERTY TATTOO SUPPLIES, INC.

#### ARTICLE II - DURATION

This corporation shall have perpetual existence.

#### ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any or all legal business.

#### ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue seven thousand, five hundred (7,500) shares of One Dollar (\$1.00) par value common stock

#### ARTICLE V - PRE-EMPTIVE 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 prorata

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Florida Bar No. 141497

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share thereof, (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

## ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial principal office of this corporation is 2400 E. Commercial Blvd., Suite 820, Fort Lauderdale, FL 33308, and the name and address of the initial registered agent of this corporation is Thomas M. Clark, at 2400 E. Commercial Blvd., Suite 820, Fort Lauderdale, FL 33308.

## ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director 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. The name and address of the initial Director of this corporation is:

John Saponaro 1124 Jefferson Street Hollywood, FL 33019

### ARTICLE VIII - INCORPORATOR

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

Thomas M. Clark 2400 E. Commercial Blvd., Suite 820 Fort Lauderdale, FL 33308

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## ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former Officer or Director, to the full extent permitted by law.

### ARTICLE X - 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 Incorporator has executed this Articles of Incorporation on Sept. 1999

THOMAS M. CLARK

STATE OF FLORIDA COUNTY OF BROWARD

BEFORE ME personally appeared THOMAS M. CLARK, to me well known and known to me to be the person described in and who executed the foregoing instrument, or who produced as identification, and he acknowledged to and before me that he executed said instrument for the purposes therein expressed.

Deborah R. antonelli NOTARY PUBLIC

My commission Expires: (Seal)

OFFICIAL NOTARY SEAL DEBORAH K ANTONELLI NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC609709 MY COMMISSION EXP. JAN. 7,2001

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#### 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 LIBERTY TATTOO SUPPLIES, INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE TOWN OF FORT LAUDERDALE, STATE OF FLORIDA, HAS NAMED THOMAS M. CLARK, AT 2400 E. COMMERCIAL BLVD., SUITE 820, FORT LAUDERDALE, FLORIDA, 33308, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

THOMAS M. CLARK

TITLE

INCORPORATOR

DATE:

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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 ACCEPT TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

THOMAS M CLARK REGISTERED AGENT

DATE:

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Thomas M. Clark, P.A.

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