DATE 91-99

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

P99880081078

Re: (Name of Corporation), Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee For Registered Agent Designation for the above named corporation.

PO BOX 17Z

TS/OMORADA FL
33036

PHONE

(305) 664 9367

Area Code Number Ext.

9/10

ARTICLES OF INCORPORATION

	of	
T. BORSKI	Inc.	
·	(name of corporation)	
The undersigned acting as the incorporators of the following articles of incorporation for such corp	a corporation under the Florida Busi oration:	ness Corporation Act, adopt(s)
ARTI The name of the corporation is:	ICLE I - CORPORATE NAME	ALLED SEE
T. BOKCKI	INC.	700 -
- COUNTING	IIIV.	
A	ARTICLE II - DURATION	**************************************
This corporation shall exist perpetually unless		
aniess (dissolved according to Florida law.	
A	ARTICLE III - PURPOSE	
The corporation is organized for the purpose of United States and the State of Florida.	fengaging in any activities or busines	s permitted under the laws of the
The corporation is authorized to issue 1, 000	V - INITIAL PRINCIPAL OFFICE	•
STREET ADDRESS 101 PARKER	RRIVE	
		5
CITY I SLAMOR ADA	FLORIDA	ZIP 733036
Mailing address, if different		
STREET ADDRESS P. D. BOX 122		
		to the same of the
CITY ISLAMORADA	FLORIDA	ZIP33036
•	AL REGISTERED OFFICE AND A	
The street address of the initial registered of		
NAME TIMOTHY J. BORSK		gent at the office is.
1777777 00 1 00 1	A .	4
CITY CRAIG-KEY	Over seas Highway	ZIP 3 30 36
······································		

This corporation shall have () directors initially. The numb	er of directors may be
either increased or diminished from time to time by the By-Laws, addresses of the initial director(s) of the corporation are as follows:	but shall never be less than one (1). The names and
NAME TIMOTHY JAMES BORSKI		
ADDRESS PO. Box 122		4-4-
CITY Islamorada	STATE	ZIP 33036
NAME JILL ANNE ZIMA		
ADDRESS 101 PARKER DRIVE		
CITY ISLAMORADA	STATE	ZIP 33036
NAME		
ADDRESS		70 · · · · · · · · · · · · · · · · · · ·
CITY	STATE	ZIP
ARTICLE VIII - IN	CORPORATORS	
The names and addresses of the incorporators signing these Artic	les of Incorporation are as follows	:
NAME TIMOTHY JAMES BOKSKI		
ADDRESS PO BOX 17.7		=
CITY To AMONADA	STATE	ZIP 33036
NAME Jil Anne Zima	1	
ADDRESS OF PARKER DRIVE	STATE L	ZIP 33036
CITY ISLAMORADA	STATE C	0000
NAME		=
ADDRESS	OTTAME.	ZIP
CITY	STATE	n d
The undersigned incorporator(s) have executed these Article	Ar Ar I	7 7 7
day of Syptember	19 9 9 AMAI	(Signature)

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

SECRETARY OF START

T. BORSKI, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at Mile Marker 72, Overseas Highway 1

has named TIMOTHY JAMES BORSKI

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

Sept Z, 1999