

999000084468



ACCOUNT NO. : 072100000032

REFERENCE : 384830 162199A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : September 23, 1999

ORDER TIME : 1:07 PM

ORDER NO. : 384830-005

CUSTOMER NO: 162199A

CUSTOMER: Rick M. Morse, Cpa  
RICK M. MORSE, CPA, P.A.  
RICK M. MORSE, CPA, P.A.  
Suite 300  
1700 University Drive  
Coral Springs, FL 33071

.000002995380-9  
-09/23/99-01083-001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

DOMESTIC FILING

NAME: ADI OF SOUTH FLORIDA, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
\_\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jamela Abaied

EXAMINER'S INITIALS:

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 SEP 23 PM 3:36  
RECEIVED  
99 SEP 23 PM 2:24  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
9/23/99

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 SEP 23 PM 3:36

ARTICLES OF INCORPORATION  
OF

ADI OF SOUTH FLORIDA, INC.

ARTICLE I

NAME

The name of this Corporation shall be :

ADI OF SOUTH FLORIDA, INC.

ARTICLE II

PURPOSE

This corporation is organized for the purpose of CRAFTED  
GOODS and transacting any and all lawful business.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$ 1  
par value common stock.

ARTICLE IV

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office of this  
corporation is:

2409 NORTH FEDERAL HWY, #8  
DELRAY BEACH, FL 33483

and the name of the initial registered agent of this  
corporation at the above address is:

LANCE HOROWITZ

ARTICLE V

DIRECTORS

This corporation shall have one 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:

LANCE HOROWITZ  
2409 NORTH FEDERAL HWY, #8  
DELRAY BEACH, FL 33483

ARTICLE VI

INCORPORATOR

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

LANCE HOROWITZ  
2409 NORTH FEDERAL HWY, #8  
DELRAY BEACH, FL 33483

ARTICLE VII

POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

ARTICLE VIII

INDEMNIFICATION

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

ARTICLE IX

AMENDMENT

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

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this 21<sup>ST</sup> day of Sept 1999

*[Signature]*

STATE OF FLORIDA  
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 21<sup>ST</sup> DAY of Sept, 1999, LANCE HOROWITZ appeared before me the undersigned authority, to me well known and known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same, freely and voluntarily for the purpose therein expressed.

*[Signature]*  
Notary Public

ss: My Commission Expires:



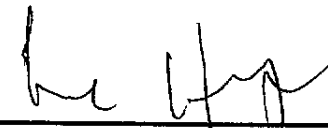
CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED.

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

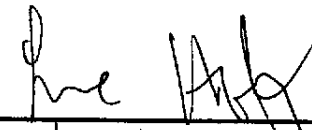
ADI OF SOUTH FLOLRIDA, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF DELRAY BEACH, FLORIDA HAS NAMED LANCE HOROWITZ AT 2409 NORTH FEDERAL HWY, #8, DELRAY BEACH, FLORIDA 33483 AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE x   
CORPORATE OFFICER  
TITLE x Pres.  
DATE x 9/21/99

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 x   
DATE x 9/21/99

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 SEP 23 PM 3:36