

P99000086879

Florida Department of State
Division of Corporations
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FLORIDA PROFIT CORPORATION OR P.A.

Cruisin of Sawgrass, I nc.

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Oct. 01 1999 08:15AM PT

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FROM : Florida Accounting Service

N. Culligan OCT 1 - 1999

AUDIT NUMBER H990000245888

ARTICLES OF INCORPORATION OF
CRUISIN OF SAWGRASS, INC.

The undersigned incorporator(s), for the purpose of forming a corporation for profit pursuant to chapter 607, Florida Statutes, does hereby adopt the following Articles of Incorporation:

ARTICLE I: NAME

The name of the corporation is: CRUISIN OF SAWGRASS, INC.

ARTICLE II: DURATION

This corporation shall have perpetual existence commencing on the date of this filing of these articles of incorporation with the Department of The State Of Florida.

ARTICLE III: PURPOSE

This corporation is organized for the purpose of engaging in any and all lawful business activities in the State Of Florida

ARTICLE IV: SHARES

This corporation is authorized to issue 500 shares of \$ 1.00 par value common stock.

ARTICLE V: QUORUM FOR STOCKHOLDER'S MEETING

Unless other wise provided for in the corporation's bylaws, A majority of the shares entitled to vote, represented in by person or by proxy, shall be required to constitute a quorum at a meeting of shareholders.

PREPARED BY:
NAME:
ADDRESS:
PH#.

FLORIDA STATE ACCOUNTING, INC.
533 N. NOVA ROAD, SUITE 115
ORMOND BEACH, FL. 32174

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ARTICLE VI: INITIAL REGISTERED OFFICE AND
REGISTERED AGENT

The street address of the initial principal office of this corporation is 400 Parque Drive, Ormond Beach, Florida 32174 and the name of the initial registered agent of this corporation is FLORIDA STATE ACCOUNTING, INC., whose address is 533 N. Nova Road, Suite 115, Ormond Beach, Florida 32174-4421.

ARTICLE VII: INITIAL BOARD OF DIRECTORS

The corporation shall have one director initially. The number of directors may either increased or diminished from time to time in the manner provided in the by-laws, but shall never be less than one. The name(s) and street addresses of the initial directors of the corporation are as follows: ALAIN MYARA

400 PARQUE DRIVE
ORMOND BEACH, FL. 32174

ARTICLE VIII: RESTRICTIONS OF TRANSFER OF
CAPITAL STOCK

Unless otherwise provided in the corporation's by-laws, no shares of the capital stock of this corporation may be transferred without prior approval of the corporation's board of directors.

ARTICLE IX: INDEMNIFICATION

The corporation shall indemnify its officers, the directors and authorized agents for all liabilities incurred directly, indirectly, or incidentally to the services performed for the corporation, to the fullest extent permitted under florida law existing now or hereinafter enacted.

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The name(s) and street address(es) of the corporation's
incorporator to these articles of incorporation is (are):

**SIGN
HERE**

ALAIN MYARA
400 PARQUE DRIVE
ORMOND BEACH, FL. 32174

The undersigned incorporator(s) has(have) executed these articles
of incorporation this 30 day of SEPTEMBER, 1999

(An additional article must be added if an effective
date is requested).

X Alain Myara - President
Signature

NOTARIZATION IS NOT REQUIRED

NOTE: Affixing an officer title after a signature of an
incorporator does not constitute the designation of
officers.

ARTICLE X: RESTRICTIONS OF TRANSFER OF CAPITAL STOCK

Unless otherwise provided in the corporation's by-laws, no
shares of the capital stock of this corporation may be transferred
without prior approval of the corporation's board of directors.

ARTICLE XI: INDEMNIFICATION

The corporation shall indemnify its officers, the directors
and authorized agents for all liabilities incurred directly,
indirectly, or incidentally to services performed for the
corporation, to the fullest extent permitted under Florida law
existing now or hereinafter enacted.

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CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501. 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: CRUISIN OF SAWGRASS, INC.
2. The name and address of the registered agent and office is:

FLORIDA STATE ACCOUNTING, INC.
(name)

533 N. NOVA ROAD, SUITE 115
(P.O. Box not acceptable)

ORMOND BEACH, Florida 32174-4421
(City/State/Zip)

Having been named as registered agent 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.


Joseph P. Clark
(Signature)
PRESIDENT

DATE 9/30/99

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