PAGE LETTER OF TRANSMISTALS

DATE

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

700003010657--2 -10/11/99--01019--017 *****78.75 *****78.75

Re: BORGHESE FAMILY Enterprises, Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

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.

Very truly yours.

SECRETARY OF SECRETARY OF

BORGHESE PANILY Enterprises Inc. (Name of Rosporation)

— MAILING ADDRESS OF CORPORATION —			
	PHONE —		
Area Code	Number	Ext.	

10, 01

ARTICLES OF INCORPORATION

BORGHESE Family Enterprises Incorporated (name of corporation)

The undersigned acting as the incorporators of the following articles of incorporation for such contact the following articles of the following ar	of a corporation under the Florida B rporation:	usiness Corporation Act, adopt(s)
AR	TICLE I - CORPORATE NAME	
The name of the corporation is:		+ (
BORGHESE FAMILY E	rterprises Incom	porated of
ŕ	ARTICLE II - DURATION	CT 1
This corporation shall exist perpetually unless	ss dissolved according to Florida lay	V. SECTIONS
The corporation is organized for the purpose Jnited States and the State of Florida.	e of engaging in any activities or bus	iness permitted under the laws of the
A The corporation is authorized to issue	RTICLE IV - CAPITAL STOCK Shares of common stock, par	value \$ per share.
	LE V - INITIAL PRINCIPAL OFFIC	E
STREET ADDRESS		
170 ALCAZAR ST		
CITY ROYAL PAlm Beac		ZIP 334//
Mailing address, if different		· · ·
STREET ADDRESS		
	· · · · · · · · · · · · · · · · · · ·	
CITY	FLORIDA	ZIP
ARTICLE VI - IN	NITIAL REGISTERED OFFICE A	ND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME VINCENT A. BORGH	ESE	·- ·
ADDRESS 170 ALCAZAR ST.		
CITY ROUAL PAlm Beach	FLORIDA	ZIP 33411

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have Two (2 er increased or diminished from time to time by the By-Laws resses of the initial director(s) of the corporation are as follows:	, but shall ne vs:	ever be less tha	in one (1). The nam	tors may be nes and
AME VINCENT A. BORGHE				
DDRESS 170 ALCAZAR ST.		<u>-</u>		34
0 (010)	STATE	FI	ZIP 3	3417
AME DIXIE M. BORGHESE			-	े हरा
DDRESS 170 ALCAZAR ST	. 4.			, 322 A
Royal PAlm Beach	STATE	F(ZIP 3	3411
IAME				_
ADDRESS				
CITY	STATE		ZIP	
ARTICLE VIII - II ne names and addresses of the incorporators signing these Arti			s follows:	· · · · · · · · · · · · · · · · · · ·
1 1 1		-		
NAME VINCENT A. BORGHESE	<u>-</u>	:		
CITY ROUAL Prim Beach	STATE	E/	ZIP	3411
109/71				- = 7
NAME DIXIE M. BORGHESE ADDRESS 172 A COLAR ST.	· 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			:: :: :: ::
OFFICE DATE PROPERTY	STATE	F1	ZIP 3	3411
NAME	. <u></u> "			
ADDRESS			9	• ************************************
CITY	STATE		ZIP	
The undersigned incorporator(s) have executed these Arti	cles of Inco	orporation thi	s eight	2
ay of October	., 19 <u>. 9 7</u>			· · · =
			· · · · · · · · · · · · · · · · · · ·	Signature)
D-	reid	1. Byly	1	Signature)
			(Signature)

CERTIFICATE OF DESIGNATION REGISTERED OFFICE

SECULTARISCE LIVER OF STATE

BORGHESE Family Enterprises Incorporated
(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 170 Alcazar ST.

Royal Palm Beach Fl 33411

has named Vincent A. Borghese

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.

(Signature)

(Date)