

99 NOV 15 AM 10: 44

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

000003044760--1 -11/15/99--01137--001

a check

| Subject. | ine incorporation linea Geramics, inc. |
|------------|---|
| Enclose | ed is an original and One (1) copy of the articles of incorporation and |
| 5 7 | 0.00 Filing Fee |
| \$7 | 8.75 Filing Fee & Certificate |
| \$1: | 22.50 Filing Fee & Certified Copy |
| \$1 | 31.25 Filing Fee, Certified Copy and |
| | |
| From: | Lorrie A. Fernandez |
| | 8940 NW 2nd Street |
| | Coral Springs FL 33071 |
| | (954) 227-0272 |
| | |

NOTE: Please provide the original and one copy of the

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| Aracies of incorporation |) (L L L) |
|---|---|
| Of | 99 NOV 15 AM 10: 45 |
| Inca Ceramics, Inc. | SEUR TANY OF STATE |
| | TALLAHASSEE, FLORIDA |
| The undersigned incorporator(s), for the purpose of forming a con Corporation Act, hereby adopt(s) the following Art | rporation under the Florida Business icles of Incorporation, |
| <u> Article I - Name</u> | |

| The name of the corporation shall Inc | ca Ceramics, Inc. |
|--|--|
| | |
| Artic | le II - Principal Office |
| The principal place of business and mail | ling address of this corporation shall be: |
| | Business Address: |
| Address: 8940 N | W 2nd Street |
| City: Coral Sprin | ngs |
| State:FL | Zip: 33071 |
| | Mailing Address: |
| Address: SAME | |
| City: | |
| State: | Zip: |
| <u>Article III - S</u> | Shares of Company Stock |

The number of shares of stock that this corporation is authorized to issue is,

1000 Shares, No Par Value.

Article IV - Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

| Name: Lorrie A. Fernandez | | | |
|---------------------------|------------|--|--|
| Address: 8940 NW 2 | nd Street | | |
| City: Coral Springs | | | |
| State: FI | 7in: 33071 | | |

Article V - Incorporator(s)

The name(s) and street address (es) of the incorporator(s) to these Articles of Incorporation is (are):

| Name: Lorrie A. Fernandez Address: 8940 NW 2nd Street | | Name:Address: | | _ |
|--|---------------------|---------------|---|--------------|
| | | | | |
| State: FL | Zip: 33071 | State: | Zip: | |
| Name: | | Name: | | |
| Address: | | Address: | | |
| City: | | City: | | |
| State: | Zip: | State: | Zip: | |
| The undersign 1st | Signature Signature | - | - · · · · · · · · · · · · · · · · · · · | |
| | Signature | | | |
| | Signature | | | |

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

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SEURETART OF STATE TALLAHASSEE, FLORIDA

PRESENT 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 THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF

| 1. The name of the corporation | Inca Ceramics, Inc. |
|--------------------------------|------------------------|
| 2. The name and address of the | e registered agent and |
| Name: Lorrie | A. Fernandez |
| Address: 894 | 0 NW 2nd Street |
| City: Coral S | Springs |
| State:FL | Zip: 33071 |

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.

09/01/99

Date

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Designation of Registered Agent Fee \$35.00