DATE 10/13/99 Florida Department of State Division of Corporations FILED P.O. Box 6327 OCT 15 PM 6:43 Tallahassee, FL 32314 100003015581--5 -10/15/99--01028--008 ****122.50 *****78.75 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. Very truly yours. MAILING ADDRESS OF CORPORATION -South St.

Ext.

PHONE

Number

(305)296

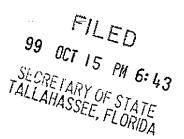
Area Code

A	ARTICLES (OF INCORPORA	TION	<i>r</i> .
ARTICLES OF INCORPORATION of Whitz Street Partner inc. (name of corporation) The undersigned acting as the incorporators of a corporation under the Florida Business of following articles of incorporation for such corporation:			99 FILED	
Whitz	Street	Partners	Inc ·	SECULIE PU
	(nan	ne of corporation)		TALLAHARY OF " 6: 43
The undersigned acting as the incorporation for s	orators of a cor such corporation	poration under the Floor:	orida Busines	s Corporation Act, adopt(s)
	ARTICLE .	I - CORPORATE NAM	ИE	
The name of the corporation is:	_			•
wh	ite S	treet Par	tnes	INC
	ARTIC	CLE II - DURATION		
This corporation shall exist perpetual	ly unless disso	lved according to Flor	rida law.	
	ARTIC	CLE III - PURPOSE		
The corporation is organized for the public United States and the State of Florida.	ourpose of enga	aging in any activities	or business p	permitted under the laws of the
	ARTICLE	E IV - CAPITAL STOC	'K	
The corporation is authorized to issue	e 100 s	hares of common stoc	ck, par value	\$ <u>/. 00</u> per share.
The street address of the initial princi		NITIAL PRINCIPAL C if different, the mailin		
STREET ADDRESS //C	16 Wh	ite St.		
			= =	
CITY KEY WE	st	FLORIDA		ZIP 3304 0
Mailing address, if different				
STREET ADDRESS 9,05	<u> 50</u>	wth St.		
				22. /
CITY KEY WE	ist	FLORIDA		ZIP 33040
ARTICLE V	VI - INITIAL I	REGISTERED OFF	ICE AND A	GENT
The street address of the initial re-	gistered office	e and the name of th	e initial regi	istered agent at the office is:
NAME (Michae	1 R	Glossman	^	
ADDRESS 905	South	St.		
CITY KEN WEST		FLORIDA		ZIP 33040

ARTICLE VII - INITIAL BOARD OF DIRECTORS

either increased or dimi	hall have	the By-Laws, but shall n	tors initially. The newer be less than on	umber of directors may be the (1). The names and
NAME (\(\setminus \)	listine A.	Glossman		
ADDRESS 90		5 1 ·		
CITY K	ev West	STATE	FL	ZIP 33040
NAME	,			
ADDRESS	- (
CITY		STATE		ZIP
NAME				
ADDRESS		_		
CITY		STATE		ZIP
The names and address	es of the incorporators signi		poration are as follo	ows:
NAME Ch	ristine A. 5 South	Glossman)	
ADDRESS 90	5 South	51.		To the state of th
CITY K		STATE	FL	ZIP 33040
NAME				
ADDRESS _				<u>v.</u> ,
CITY		STATE		ZIP
NAME				
ADDRESS			- 4 .4	
CITY	-	- STATE		ZIP
The undersigned incoday of Octov	orporator(s) have execute	19 <i>99</i>		13
		Qhuit	mi Alt	On ma(Signature)
				(Signature)
				(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



White	Street	Partners	inc.	_
		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 905 South St.
KEY WEST, FL. 33040
has named Michael R. Glossman
located at the aforesaid address, as its registered agent to accept service of process within this

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)

state.

(Date)