POODOD 11727

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

00 DEC 18 AM 11: 30

SECHETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 □ \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED DOROTHY B. ZAHARAICO

Name (Printed or typed) FROM: _____ 8109 ALISTER PLACE
Address ST. LUCIE WEST, FL 34986
City, State & Zip

NOTE: Please provide the original and one copy of the articles.

56/- 489-02/9 Daytime Telephone number

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

The Kangaroo's Treasure, Inc.

SECRETARY OF STATE

00 DEC 18 AMI1: 30

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2083 Florida Mango Road West Palm Beach, Florida 33406

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Dorothy B. Zaharako, CPA 8109 Alister Place St. Lucie West, Fl 34986

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Dorothy B. Zaharako, CPA 8109 Alister Place St. Lucie West, Fl 34986

Signature / Incorporator

Date FLOR

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 / Registered Agent

Data