19990009986

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

SUBJECT:	KHAMELEON, IN	16.	
	(Proposed corp	orate name - must include suf	fix)
Enclosed is an origin	nal and one(1) copy of the artic	les of incorporation and a	check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee	\$87.50 Filing Fee,
	& Certificate of Status	& Certified Copy ADDITIONAL CO	Certified Copy & Certificate of Status PY REQUIRED
FROM	: MARK WEIT Name (F	HORN Printed or typed)	
	16200 NE	13 AVE-	<u></u>
	NONTH MIAM) B	EACH, FL 33	FILED 99 OCT 15 AM SECRETARY OF TALLAHASSEE.
	305 - 940 -		LED 15 AM ARY OF 18SSEE, T
	Daytime T	elephone number	

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



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:

KHAMELEON, INC.

ARTICLE II PRINCIPAL OFFICE

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

16200 NE 13 AVE.

NONTH MIAMI BEACH, FL 33162

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MARK WEITHORN

16200 NE 13 AVE.

NONTH MIAMI BEACH, FL 33/62

ARTICLE V INCORPORATOR

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

MARK WEITHORN

KHANELEON, INC.

16200 NE 13 AVE.

NORTH MIAMI BEACH, FL 33/6:

Signature/Incorporator

10 /1, /99 Date OCT IS MY 3

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

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

Date