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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT CORPORATION OR P.A.

LEMONT SERVICES, INC.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION

of
LeMont Services, Inc.

The undersigned incorporators, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

Name

The name of the corporation shall be:
LEMONT SERVICES, INC.

ARTICLE II

Principal Office

The principal place of business of this corporation shall be:
28224 MEADOWLARK LANE
BONITA SPRINGS, FL 34134

ARTICLE III

Duration

This corporation shall exist perpetually.

ARTICLE IV

Purpose

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE V

Shares

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time shall be:

10,000 SHARES OF COMMON STOCK
HAVING PAR VALUE AT \$0.01 PER SHARE

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ARTICLE VI
registered agent

The name and address of the initial registered agent of this corporation shall be:

JEROME LEMONT
28224 MEDOWLARK LANE
BONITA SPRINGS, FL 34134

ARTICLE VII
directors

The names and street addresses of the persons who shall serve as directors until the first annual meeting of shareholders, or until their successors are elected, are:


JEROME LEMONT, 28224 MEDOWLARK LANE, BONITA SPRINGS, FL 34134

ARTICLE VIII
incorporators

The names and street addresses of the incorporators to this articles of incorporation are:

JEROME LEMONT 28224 MEDOWLARK LANE, BONITA SPRINGS, FL 34134

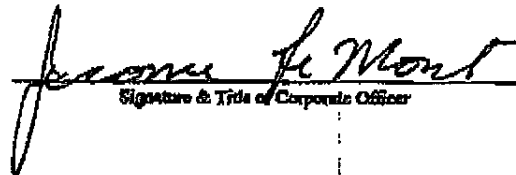
IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this 24th day of September, 1999.


Jerome LeMont, Incorporator

CERTIFICATE OF DESIGNATION
registered agent/ registered office

Pursuant to the provisions of Section 607.05, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

1. The name of the corporation is:
LEMONT SERVICES, INC.
2. The name and address of the registered agent and office is:
JEROME LEMONT
28224 MEDOWLARK LANE
BONITA SPRINGS, FL 34134


Signature & Title of Corporate Officer

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 accept the duties and obligations of my position as registered agent.


Signature of Registered Agent

DATED this 24th day of September, 1999.

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