POOOOOQ907C TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 DO MAR 16 AM 7: 17
SECRETARY OF STATE

X W X W Y W W Y Y W Y W Y Y W Y Y W Y Y Y Y Y Y Y Y Y Y		Dr.	
SUBJECT: KNR INVESTMENTS, INC. (Proposed corpo	rate name - must include suff	50000317 -03/16/00- **** 131.6 #87.	
Enclosed is an original and one(1) copy of the artic	les of incorporation and a	. check for :	#0
S70.00 S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	X S87.50 Filing Fee, Certified Copy & Certificate of Status	
	ADDITIONAL CO		
FROM: PAUL S. MANN Name (Printed or typed)		·
TWO GARDEN CENTER	SUITE 301 Address		
	0020 cy, State & Zip		

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

Daytime Telephone number

gr 3/23

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:

KNR INVESTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

1725 17th LANE

LAKE WORTH, FL 33463

ARTICLE III SHARES

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

1,000 COMMON SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

KEITH PARSONS

1725 17TH LANE

LAKE WORTH, FL 33463

ARTICLE V INCORPORATOR

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

PAUL MANN

TWO GARDEN CENTER SUITE 301

BROOMFIELD, CO 80020

Signature/Incorporator

MARCH 6, 2000

Date

(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

Zoos Date