DODOOOBOSOS TRANSMITTAL LETTER

00 MAR 20 AM 11: 14

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

SUBJECT:	(Proposed corpor	at ea v		
	(Proposed corpor	ate name - must include sul	fix) 200021753	
		41	0 00031753 -03/20/00010	
			*****78.75 *	
Enclosed is an origina	l and one(1) copy of the articles	s of incorporation and a	check for:	
\$70.00	4 \$78.75	□\$122.50	□ \$131.25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate	& Certified Copy	Certified Copy	
		.,	& Certificate	
	•			
		ADDITIONAL CO	PY REQUIRED	
		,		
FROM:	FROM: Dr. GARY WORTSMAN Name (Printed or typed)			
Name (Printed or typed)				
2 Fair Field Blvd. Suite 5				
	Address			
Proto Medra Rock F/ 22 287				
	Ponte Vedra Beach, FL. 32087 City, State & Zip			
	013,7	, , , , , , , , , , , , , , , , , , ,		
	9-11 71 2 -	1-1		
	904 268-7 Daytime To	/ (/		
Daytime Telephone 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.

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ARTICLE I

The name of the corporation shall be:

GARON INCORPORATED

ARTICLE II PRINCIPAL OFFICE

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

2 Fairfeild Blud suite 5 Ponte Vedra Beach, FL, 32082

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

1000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Dr. GARY WORTS MAN
PLUS SCOTT M'IL ESTATES Hay
Sax FC. 32257

ARTICLE V INCORPORATOR

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

GAMY WORTSMAN 9445 Scott Mill Estates way

(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

ignature/Registered Agent