P000000033032

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

SUBJECT:	•••	_Technolog	\$7	es Inc	
	(Proposed corpo	orate name - must include suff		.4836 01114011 . *****87.50	
Enclosed is an original and one (1) copy of the articles of incorporation and a check for:					
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	G. Lbert Name (F	KE 155É			
		ETHA COURT	Apt # 6		
	STUART	FL, 3499 State & Zip	14	3 至 卫	
561 260 64 68 Daytime Telephone number				FILED 3: 01	
				3:0	

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

J.C.

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Pro	· ·
ARTICLE I NAME	
The name of the corporation shall be:	
KATHAR BIO-TECK no Logy	SERVICES INC.
ARTICLE II PRINCIPAL OFFICE	_
The principal place of business/mailing address is:	,
2190 SE LETHA COURT Apt #	- T _S : 00
STUART FL.34994	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	27
Environmental clear UP	FILED NAR 27 PN 3: 01 SLUMBASSEE, FLURIDA TALLAMASSEE, FLURIDA
ARTICLE IV SHARES	<u> </u>
The number of shares of stock is:	
10,000-	→
ARTICLE V INITIAL OFFICERS DIRECTO	RS - CT 1012 CT
The name(s) and address(es): NEIL MITTELMARK.	5534 SE HARbor IERRACE, STUNKI FL
CILLET KEISSE, SIGO SE LETHA COURT HOT "	6, STUART FC. 53774
WOLFGARS ADLER, 8192 SE PAUROTIS LANE	E, Hobe Sound FL, 33455
ARTICLE VI REGISTERED AGENT	
The name and Florida street address registered agent are:	
GILLERT KEISSE ZIGO SE LETHA COURT APT #6 STUART FL.34994	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator are: GILLERT KEISSE 2190 SE LETHA COURT APT #6 STURET FL. 34994	1.取磨龙子松为枣水南南水南南南水南水水水水水南南南南南水水水水水水水水水水水水水水水水水水
Having been named as registered agent and to accept service of process for	r the above stated corporation at the place designated in
this certificate, I hereby accept the appointment as registered agent and age	ree to act in this capacity. I further agree to comply with
the provisions of all statutes relating to the proper and complete performa obligations of all position as registered agent.	nce of my duties, and I am jamiliar with and accept the
Met Lange	03/21/00
Signature/Registered Agent	Date
Gilbert Kain	03/21/00
Signature/Incorporator	Date

ARTICLE VIII

MEDICAL CARE REIMBURSEMENT PLAN OF

1. BENEFITS

The Corporation shall reimburse all eligible employees for expenses incurred by themselves and their dependents, as defined in IRC S152, as amended, for medical care, as defined in IRC S213(e), as amended, subject to the conditions and limitations as hereinafter set forth. It is the intention of the Corporation that the benefits payable to eligible employees hereunder shall be excluded from their gross income pursuant to IRC S105, as amended.

2. ELIGIBILITY

The following enumerated employees, who are employed on a full time basis at the date of inception of this Plan, including those who may be absent due to illness or injury on said date, are eligible employees under the Plan.

Note: This Medical Care Reimbursement Plan conforms to the Revenue Act of 1978, which provided for nondiscriminatory rules for eligibility, you may only exclude from coverage, the following classes of employees:

- (a) Employees with less than three years service.
- (b) Employees under age 25
- (c) Part time and seasonal employees.
- (d) Union employees that have similar coverage pursuant to a plan offered by their Union.
- (e) Nonresident alien employees, who perform their services outside the United States.

In addition, the plan must benefit at least 70% of all employees, or 80% of all eligible employees if 70% of all employees are eligible.

MAME.

GILBERT KEISSE 2190 SELETHA COURT #6, STUART FL. 34994

NEIL MITTEL MARK 5534 SE HARbor TERRACE STUART FL. 34994

WOLF GARG ADLER 8192 SE PAUROTIS LANE, HOLE SOUND FL. 33455