POCCESSION FILED

00 JUN 21 AM 8: 33

SEURETARY OF STATE TALLAHASSEE, FLORIDA

-06/21/00--01066--003 *****87.50 *****87.50

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

SUBJECT:	Jagaro Commo Geroposed corporati	unications Ename-must inclu	Inc. JOE SUFFIX)	
Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for:	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:		Hallahan inted or typed)		=
	4125	amber Wa	ry	
	Weston City,	7 0/ 3333/ State & Zip	/	· • • •
	954 - Daytime T	399-049 elephone number		(r) 545) — — 2

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

Par 6/26/00/

ARTICLES OF INCURPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) FILED ARTICLE I NAME The name of the corporation shall be: 00 JUN 21 AM 8: 33 Organo Communications fuc SECRETARY OF STATE TALLAHASSEE, FLORIDA ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4125 amber Way Western 01 33331 ARTICLE III PURPOSE The purpose for which the corporation is organized is: marketing, Communications & fund development professional corporations. The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): 4/25 amber Way Weston, O/ 3333/ ARTICLE VI REGISTERED AGENT The name and Florida street Robert O. Hallahan III 4125 amber Way Weston, 21 3333/ ARTICLE VII INCORPORATOR The name and address of the Incorporator is: aniber way Weston, 0/ 3333/

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

0/18/00 Date

/ 17 /

Date