TRANSMITTAL LETTER

P01000020263

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

> 500003758555--6 -02/26/01--01005--002

SUBJECT: AVILOR ENTERPRISES ******70.00 ******70.00 (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL COPY REQUIRED		
FROM: Midred Gelfond Name (Printed or typed)				
9000 Park Blvd #7 PEB 23				
	Seminol City,	e, FL 33 State & Zip	23 All 8: SSEE, FLOR	

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

7-398-6371 Daytime Telephone number

T. Burch FEB 2 6 2001

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AVILOR ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9000 PARK BLVD, #7, SEMINOLE, FL 33777

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TAXIS

ARTICLE IV SHARES

The number of shares of stock is:

AT \$1,00 PAR VALUE 100 SHARES

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LEONARD E GELFOND

9000 PARK BLVD, #7, SEMIHOLE, FL 33777

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

MILDRED GELFOND 9000 PARK BLVD, #7, SEMINOLE, FL33777

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