

PO1000025855

TRANSMITTAL LETTER

March 5, 2001

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

900003532079--6
-01/11/01--01013--002
d a check for ****78.75 ****78.75

Subject: NO REASON, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00

Filing Fee

FROM: Anna L. Brown, Esq.
1100 Fifth Avenue South
Suite 201
Naples, FL 34102

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*****70.00

T. Burch

MAR 15 2001

PAW 3/13/01



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 12, 2001

DAVA EVANS MCCORD
983 COCONUT CIRCLE
NAPLES, FL 34104

SUBJECT: NO REASON
Ref. Number: W01000000963

We have received your document for NO REASON and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please complete Article(s) VI.

You must list at least one incorporator with a complete business street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6928.

Tim Burch
Document Specialist

Letter Number: 701A00001900



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 25, 2001

DAVA EVANS MCCORD
983 COCONUT CIRCLE
NAPLES, FL 34104

SUBJECT: NO REASON INC
Ref. Number: W01000000963

We have received your document for NO REASON INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6928.

Tim Burch
Document Specialist

Letter Number: 201A00004137

**ARTICLES OF INCORPORATION
OF
NO REASON, INC.**

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

**ARTICLE ONE
NAME**

The name of the corporation that satisfies the requirements of F.S. Section 607.0401 NO REASON, INC.

**ARTICLE TWO
TERM OF EXISTENCE**

The term of the corporation's existence is perpetual.

**ARTICLE THREE
NATURE OF BUSINESS**

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the UNITED STATES, the State of Florida, or any other state, county, territory, or nation.

**ARTICLE FOUR
ADDRESS**

The address of the initial principal office and, if different, the mailing address of the corporation is: 983 Coconut Circle, Naples, FL 34104.

**ARTICLE FIVE
CAPITAL STOCK**

The maximum number of shares the corporation is authorized to issue is 1,000 at no par value.

ARTICLE SIX **LIMITATION OF LIABILITY**

Each director, stockholder, and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him/her in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him/her by reason of his/her being or having been a director, stockholder, or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder, or officer may be entitled as a matter of law.

ARTICLE SEVEN **SELF-DEALING**

No other contract or other transaction between the corporation and other corporations, in the absence of fraud, shall be affected or invalidated by the fact that any one or more of the directors of the corporation is or are interested in a contract or transaction, or are directors or officers of any other corporation, and any director or directors, individually or jointly, may be a party or parties to, or may be interested in such contract, act, or transaction, or in any way connected with such person or person's firm or director of the corporation is hereby relieved from any liability that might otherwise exist from this contracting with the corporation for the benefit of himself or any firm, association, or corporation in which he may be in any way interested. Any director of the corporation may vote upon any transaction with the corporation without regard to the fact that he is also director of such subsidiary or corporation.

ARTICLE EIGHT **DIRECTORS**

This corporation shall have a minimum of one director. The initial Board of Directors shall consist of:

Dava McCord
983 Coconut Circle
Naples, FL 34104

ARTICLE NINE **INCORPORATOR**

The name and address of the incorporator is:

Dava McCord
983 Coconut Circle
Naples, FL 34104

ARTICLE TEN
POWERS OF THE INCORPORATOR

The powers of the incorporator cease upon filing of the Articles of Incorporation.

ARTICLE ELEVEN
INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent are:

Dava McCord
983 Coconut Circle
Naples, FL 34104

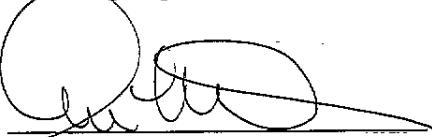
IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal on this 5th day of March, 2001.

Incorporator

Dava McCord
Dava McCord

STATE OF FLORIDA
COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 5th day of March, 2001.


Notary Public, State of Florida
My Commission Expires:

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 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.

Dava McCord
Registered Agent

Date

3/5/01