## Desertment of State By Vision of Composition P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Elekon, Inc.				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
		100	000394	4341-006 O
******** ?[]。[]] ******* ?[]。[]] 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	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:		CANTER inted or typed)		
	5481-5	feeplecha	se	
Boca Rylon, PC 33496  City, State & Zip  Bio				
	Daytime Telephone number  Daytime Telephone number			
NO	ITE: Please provide the ori	tingland one copy of the		-2 PH 2:0

T.S. TH APR 0.4.2004



ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Eyekon, Inc.

ARTICLE II PRINCIPAL OFFICE

The principle place of business/mailing address is: 548

ss/mailing address is: 5481 Steeplechase Boca Raton, Fl 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The sale of eye wear and eye

products.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares of common stock at \$1 par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name and addresses are:

Jane W. Canter 5481 Steeplechase

Boca Raton, Fl 33496

ARTICLE VI REGISTERED AGENT

Jane W. Canter

5481 Steeplechase

Boca Raton, Fl 33496

ARTICLE VII INCORPORATOR

Jane W. Canter

5481 Steeplechase

Boca Raton, Fl 33496

\*

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 of Registered Agent

Date

Signature of Incorporator

Date

01 APR -2 PM 2: 05
SECRETARY OF STATE
TALLAHASSEF STATE