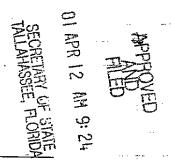
# P01000037004

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



SUBJECT:

PUNAM INC

(Proposed corporate name - must include suffix)

**200003993922-**-6 -04/12/01--01029--020 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

Enclosed is an original ar	nd one(1) copy of the artic	cles of incorporation and a	check for:
\$70.00 \$78.75 Filing Fee & Certificate		□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED

FROM:	PUNAM , , NC  Name (Printed or typed)				
	Name (Printed or typed)				
	1245 BROWARD RD.				
	Address				
_	JACKSONVILLE PL 32218 City, State & Zip				
	City, State & Zip				
	904-764-3535				
	Daytime Telephone number				

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

Pallan

#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PUNAM, INC

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SECRETARY OF STATE
THAT AMASSEE IS CORE

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1245 BROWARD RD. JACKSONVILLE, FL 32218

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

BIREN N. PATEL

1245 BROWARD RD.

JACKSONVILLE, FL 32218

#### ARTICLE V INCORPORATOR(S)

#### See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

BIREN N. PATEL 1245 BROWARD RD.

JACKSONVILLE, R 32218

ARTICLE VI THE INITIAL OFFICER & TITLE IS. BIREN. N. PATEL, PRESIDENT / DIRECTOR

The undersigned incorpor	rator(s) has(have) e	executed these A	rticles of Incorp	poration this		
16 day of	Aprel	, 19200	<u></u> .		-	:
(An additional article mus	t be added if an eff	ective date is rea	quested.)	,		
	Re	Signature			- - ===	,
Phonoidesease		Signature		· · · · · · · · · · · · · · · · · · ·		

### Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation isPUNAM, INC		·	•
2.	The name and address of the registered agent and office is:  BIREN N. PATEL  (NAME)  1245 BROWARD RD  (P. O. Box or Mail Drop Box NOT ACCEPTABLE)  TACKIONVILLE FZ 32218  (CITY/STATE/ZIP)	SECHETARY OF STATE TALLAHASSEE, FLORIDA	Q1 APR 12 AM 9: 24	APPIQVED
	(37172117212)			

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 as registered agent 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.