TRANSMITTAL LETTER

P0100047754

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

0**009941333740**017

SUBJECT:	DEMOCON, INC.				
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
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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 ADDITIONAL CO	Filing Fee Certified & Certific Status PY REQUIR	e, Copy cate of	
FROM:	MERVIN JONES Name (Printed or typed)				
	1091 NW 196 TERRA A MIAMI City, S	CE MIAMI FL 331 ddress FLORIDA 33169 State & Zip	IALLAHASSEE, FLESKII	01 NAY ~7 AN II: 06 SECRETARY OF STATE TALLAUACCES GLADINA	
	Daytime Telephone number			Ş [™] 8	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICL'E I NAME The name of the corporation shall be: DEMOCON, INC.	FILED 01 MAY -7 AM II: 06 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1091 NW 196 Terrace MIAMI FL 33169	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
TO OPERATE LEGAL BUSINESS WITHIN THE LAWS OF FLORIDA.	
ARTICLE IV SHARES The number of shares of stock is: FIVE HUNDRED SHARES, ONE DOLLAR VALUE COMMON STOCK	·
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): MERVIN JONES 1091 NW 196 TERRACE MIAMI FL 33169	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: ERICA SMART 486 NW 165 ST RD #B 407 NORTH-MIAMI FL 33169	
ARTICLE VII INCORPORATOR The name and address of the V	-
The name and address of the Incorporator is: MERVIN JONES 1091 NW 196 TERRACE MIAMI FL 33169	
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	5-4-01 Date