P0/000059827

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

SUBJECT:

000004418390---3 -06/13/01--01088--010 *****78.75 ******78.75

(Flopused et	orporate name - must include surfix)
Enclosed is an original and one (1) copy of the ar	ticles of incorporation and a check for:
☐ \$70.00 ☐ \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75
FROM: Lyke Vi Name 900 Lin	Printed or typed) Address Address

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

Daytime Telephone number

D. WHITE JUN 1 5 2001

ARTICLES OF I	NCORPORATION	V	\$4 \	FILED
In compliance with Ch	apter 607 and/or Chap	ter 621, F.S. (Pro	11)	""
ARTICLE 1	NAME			01 JUN 13 PH 1:03
The name of the corpor	ration shall be:	h iguna	Inc.	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II	PRINCIPAL OF	FICE_		
The principal place of	\sim	1 . ada a 15 111.	FL 33444	1
ARTICLE III				- - ي موت ، <u>مستندس</u>
The purpose for which	the corporation is org	anized is:	ent	, mars
ARTICLE IV	SHARES		***	
The number of shares	, -) shares		· .
ARTICLE V	INITIAL OFFICE	ERS/DIRECTOL	<u>es</u>	A
The name(s) and addr	ess(es): ZYR V 500 N	iselman Congress	Ave C108, De	In 17 Bch FC 33445
ARTICLE VI	REGISTERED A		2.5 to 1.	
The <u>name and Florid</u>	a street address regist Lyle VISE 500 N. Cor	ered agent are:	C108, Delray l	Bch FC 33445
ARTICLE VII	INCORPORATO	<u>R</u>	च _च ". े	
The name and address	ss of the Incorporator and Kerry	nercatante	2 +204, Delray	Bch, FZ 33444
و غاو خاه جاو جاو خاه خاه خاه خاه خاه و کار دارد دارد دارد دارد دارد دارد دارد	**********	********	**************************************	********
	ccept the appointment as re tes relating to the proper a	rictored agent and agr	ree to act in this capacity. I furnce of my duties, and I am far	riner agree to comply with
x + 111	<i>//</i>		<u> </u>	<u></u>
Signature/R	legistered Agent	L	6/11/0	te
1 1 1 1 1 1	7/	,	· / / Da	ıte