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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: DAVID R. PATTERSON

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NAME: THE KRNOUL, INC.

AUDIT NUMBER..... H01000090275

DOC TYPE......FLORIDA PROFIT CORPORATION OR P.A

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SECRETARY OF STATE
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### ARTICLES OF INCORPORATION

### OF

### THE KRNOUL, INC.

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:

THE KRNOUL, INC.

### ARTICLE II PRINCIPAL OFFICE

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

1400 HOY LAKE COURT ROCKLEDGE FL 32955

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares of common stock with a \$1.00 par value.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LEMOYNE ROLL 1400 HOY LAKE COURT ROCKLEDGE FL 32955

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## ARTICLE V INCORPORATOR(S)

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

LYNNE KRNOUL ROLL, PRESIDENT 1400 HOY LAKE COURT ROCKLEDGE FL 32955

LEMOYNE ROLL 1400 HOY LAKE COURT ROCKLEDGE FL 32955

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 14TH day of AUGUST 2001.

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# CERTIFICATE OF DESIGNATION OF

# REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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 is: THE KRNOUL, INC.
- 2. The name and address of the registered agent and office is:

LEMOYNE ROLL 1400 HOY LAKE COURT ROCKLEDGE FL 32955

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.

(Signature)

SECRETARY OF STATE TALLAHASSIF, FLORIO

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