## POLOCOLO9767

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

Tallahassee, FL 32314 Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$78.75 **2**-\$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED 389-555 Daytime Telephone number

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

Julisloi

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME  The name of the corporation shall be:  LHPKI KHYAK, INC.	2001 NOV 14 PM 12: 59 SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  203 CAPPLE Blud NAPLES Ha 34113  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	** <del>-</del>
Rowal Krynk	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	 <b></b>
RUBERT OVERMAN - PRESIdent. 203 CA PRI Blud NAPles. Fla 34113	·
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:	
RUBERT OUERMAN 203 CAPRI Blud WAPIES FLA 34/13 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:  ROBERT OUR MAN  203 CAPRI BIUL	-
Wholes Tla 34/13  ***********************************	ration at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act i	n this capacity
Signature/Registered Agent	Date

Signature/Incorporator

10-||-0| Date