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FLORIDA, NEW YORK  
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BAR ASSOCIATIONS

January 30, 2002

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

300004864063--2  
-02/04/02--01051--012  
\*\*\*\*\*78.50 \*\*\*\*\*78.50  
78.50 78.50

RE: Gailyard Enterprises, Inc.

Dear Sir/Madam:

I am enclosing an original and two (2) copies of the Articles of Incorporation for the above corporation, together with a check payable to your order in the amount of \$78.50 for the filing of this corporation.

Thank you for your prompt attention with regard to this matter.

Very truly yours,

  
LAWRENCE JOHN MIANO, P.A.

LJM:dm  
Encls.

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
02 FEB -4 AM 10:24

pc  
2/8

**ARTICLES OF INCORPORATION**  
**OF**  
**GAILYARD ENTERPRISES, INC.**

FILED  
STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
02 FEB -14 11:10:24

The undersigned, acting as incorporators of a corporation under the Florida General Corporation Act, adopts the following articles of incorporation for such corporation:

**ARTICLE I**

The name of the corporation is **GAILYARD ENTERPRISES, INC.**

**ARTICLE II**

This corporation may engage in any activity of business permitted under the laws of the United States and of this State.

**ARTICLE III**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is one thousand (1,000) shares of common stock, each share having the par value of \$1.00 per share.

**ARTICLE IV**

The amount of capital with which this corporation shall begin business is \$500.00.

**ARTICLE V**

This corporation shall have perpetual existence.

**ARTICLE VI**

The initial street address of the principal office of this corporation is: **3310 North Canal Street, Jacksonville, Florida 32209.**

ARTICLE VII

The corporation shall have ONE director initially, whose name and street address are as follows: **SAMUEL GAILYARD, 3310 North Canal Street, Jacksonville, Florida 32209.**

ARTICLE VIII

The names and street addresses of the subscribers to these Articles of Incorporation are as follows: **SAMUEL GAILYARD, 3310 North Canal Street, Jacksonville, Florida 32209.**

ARTICLE IX

The name and address of the Registered Agent of this corporation is as follows:

**SAMUEL GAILYARD  
3310 North Canal Street  
Jacksonville, Florida 32209**

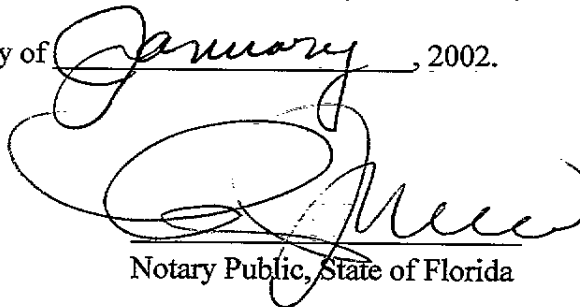
IN WITNESS WHEREOF, I have hereunto set my hand and seal, acknowledged and filed the foregoing Articles of Incorporation under the laws of the State of Florida, this 22 day of January, 2002.

  
**SAMUEL GAILYARD**

STATE OF FLORIDA     )  
                                  )  
COUNTY OF DUVAL    )

BEFORE ME, a Notary Public, authorized to take acknowledgements in the State and County set for the above, personally appeared **SAMUEL GAILYARD** known to me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal, in the State and county aforesaid this 22 day of January, 2002.

  
Notary Public, State of Florida

My Commission Expires:



Lawrence John Miano  
MY COMMISSION # CC714857 EXPIRES  
February 14, 2002  
BONDED THRU TROY FAIR INSURANCE, INC.

**DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT**

Pursuant to the provisions of Florida Statute 607.0501, 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:

The name of the corporation is: **GAILYARD ENTERPRISES, INC.**

The name of the Registered Agent is: **SAMUEL GAILYARD**


The address of the Registered Agent/registered office is:

**3310 North Canal Street  
Jacksonville, Florida 32209**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
02 FEB -1, AM 10:24

**ACCEPTANCE**

Having been named as Registered Agent and designated to accept service of process for the above corporation, I hereby accept this 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.

  
**SAMUEL GAILYARD**  
Registered Agent for  
**GAILYARD ENTERPRISES, INC.**