



P02000079782

ACCOUNT NO. : 072100000032

REFERENCE : 674225 80913A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : July 23, 2002

ORDER TIME : 11:10 AM

ORDER NO. : 674225-005

CUSTOMER NO: 80913A

CUSTOMER: Ms. Kathy Prevatt
Salter Feiber Yenser & Murphy
3940 N.w. 16th Blvd.
Building B
Gainesville, FL 32605

FILED
2002 JUL 23 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200006593082--6
-07/23/02-01051-017
*****78.75 *****70.00

DOMESTIC FILING

NAME: TRISAL, INC.

200006593082--6
-07/23/02-01051-017
*****78.75 *****78.75

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Angie Glisar - EXT. 1124

EXAMINER'S INITIALS: _____

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JUL 23 2002
TALLAHASSEE, FLORIDA

02 JUL 23 PM 12:54

RECEIVED

07-23-02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2002 JUL 23 PM 1:20

FILED

**ARTICLES OF INCORPORATION
OF
TRISAL, INC.**

THE UNDERSIGNED incorporator does hereby agree to incorporate a corporation for profit under the laws of the State of Florida, of the United States of America, by and under the provisions and statutes of that State, providing for the formation, liability, rights, privileges, benefits and obligations conferred and imposed by said law on corporations organized pursuant to the provisions thereof, and hereby makes, subscribes and acknowledges and files these Articles of Incorporation as follows:

**ARTICLE I
NAME OF CORPORATION**

1.01 NAME. -- The name of this corporation shall be **TRISAL, INC.**

**ARTICLE II
GENERAL NATURE OF BUSINESS**

2.01 POWERS. -- This corporation may engage in any activity or business permitted under F.S. 607 of the laws of the State of Florida.

**ARTICLE III
STOCK**

3.01 NUMBER. -- The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one class of Common Stock totaling 100 shares and having a par value of \$1.00 per share.

**ARTICLE IV
ADDRESS OF CORPORATION AND REGISTERED AGENT**

4.01 PRINCIPAL OFFICE. -- The street address of the principal office of the proposed corporation in the State of Florida is 7513 SW 35th Way, Gainesville, FL 32608. The mailing address of the corporation is 7513 SW 35th Way, Gainesville, FL 32608.

4.02 RELOCATION. -- The Board of Directors may from time to time move the principal office to any other address in Florida.

4.03 REGISTERED AGENT. -- The initial registered agent of the corporation is James D. Salter and his business office and address is 3940 NW 16th Blvd., Bldg. B, Gainesville, FL 32605.

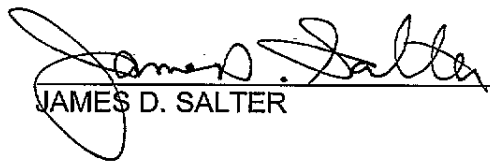
**ARTICLE V
NAME AND ADDRESS OF INCORPORATOR**

5.01 DESIGNATION. -- The name and street address of the incorporator of the Articles of Incorporation is as follows:

<u>NAME</u>	<u>ADDRESS</u>
James D. Salter	3940 NW 16 th Blvd., Bldg. B Gainesville, FL 32605

THE UNDERSIGNED, being the Incorporator to the Capital Stock hereintofores named, for the purpose of forming a corporation to do business both within and without the State of Florida, does make, subscribe, acknowledge and file these Articles, hereby declaring and certifying that the facts herein stated are true.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 19th day of July, 2002.



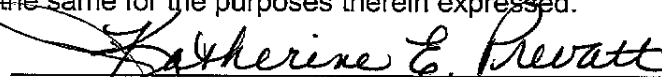
JAMES D. SALTER

**STATE OF FLORIDA
COUNTY OF ALACHUA**

The foregoing instrument was acknowledged before me this 19th day of July, 2002, by **James D. Salter**, the Incorporator, who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same for the purposes therein expressed.

(SEAL)






Notary Public, State of Florida
My Commission Expires:
Serial Number:

CERTIFICATE OF REGISTERED AGENT

I HEREBY accept designation of registered agent for **James D. Salter**, and hereby agree to fulfill the obligations thereof.

IN WITNESS WHEREOF, I have hereto set my hand and seal this **19th** day of July, 2002.

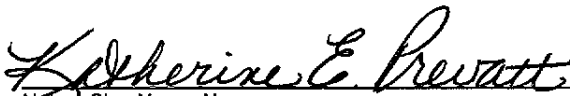

JAMES D. SALTER

**STATE OF FLORIDA
COUNTY OF ALACHUA**

The foregoing instrument was acknowledged before me this 19th day of July, 2002, by **James D. Salter**, Registered Agent, who executed the foregoing Certificate of Registered Agent, and he acknowledged before me that he executed the same for the purposes therein expressed. Such person(s): ☒ is/are personally known to me, ☐ produced a current Florida Driver's license as identification, or ☐ produced _____ as identification.

(SEAL)




Notary Sign Name Above
Notary Print Name Below

Notary Public, State of Florida
My Commission Expires:
Serial Number: