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TRANSMITTAL LETTER

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

1000007283021--08/22/02--01039--007 *****78.75 *****78.75

SUBJECT: JARZ, INC.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

□ \$78.75

□ \$70.00 Filing Fee X \$78.75

Filing Fee

& Certificate Status

Filing Fee

& Certificate Copy

□ \$87.50

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	Juan A. Ramirez		SECENTALL AT	02 AUG 22	
	Name (Printed or typed)		IASSI	G 22	
	1675 Sunshine Blvd. #107		ri≘		
	Address		FLORI	င္သာ	O
	Naples, FL 34116			38	
	City, State & Zip				
	(239) 272-1217				
	Daytime Telephone Number				

ARTICLES OF INCORPORATION

The underside incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

JARZ, INC.

ARTICLE II PRINCIPAL OFFICE

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

1675 SUNSHINE BLVD. #107 NAPLES, FL 34116

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED SHARES (100)

ARTICLE IV INITIAL REGISTER AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

SANDRA GANGL 2033 PINE RIDGE RD. #3 NAPLES, FL 34109

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

JUAN A. RAMIREZ 1675 SUNSHINE BLVD. #107 NAPLES, FL 34116

amirez Signature/Incorporator

(An additional article must be added if an effective date is requested)

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/Registered Agent

8-14-0Z Date