

P030000041026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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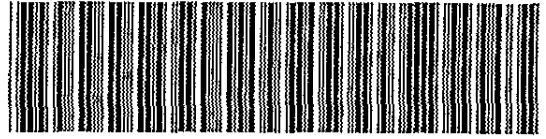
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**EFFECTIVE DATE**

3-31-03

**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:

The Olive Leaf Company

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

514 Dodecanese Blvd W  
Tarpon Springs, FL 34689

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ARTICLE IV SHARES**

The number of shares of stock is:

One Thousand shares

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Jim P Skaroulis, Pres.  
514 Dodecanese Blvd W  
Tarpon Springs, FL 34689

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Jim P Skaroulis  
514 Dodecanese Blvd W  
Tarpon Springs, FL 34689


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

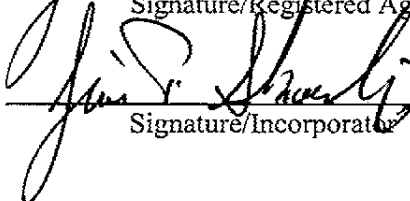
Jim P Skaroulis, 514 Dodecanese Blvd W, Tarpon Springs, FL 34689

**ARTICLE VIII EFFECTIVE DATE** The effective date of these Articles of Incorporation will be 5 business days prior to the filing date.

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

4/4/03  
Date

  
\_\_\_\_\_  
Signature/Incorporator

4/4/03  
Date