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(Requestor's Name)

ROBERT B. GOLDMAN
Attorney at Law

P.O. Box 1001
Key West, Florida 33041

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

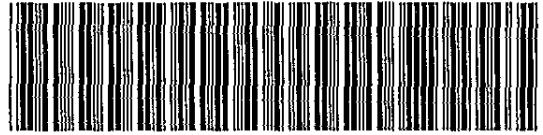
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
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ARTICLES OF INCORPORATION
OF
WILSON-GIRARD INC.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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The undersigned, for the purpose of forming a corporation under the Florida Business Corporation Act, does hereby adopt the following Articles of Incorporation.

ARTICLE I.

The name of the corporation is WILSON-GIRARD Inc..

ARTICLE II.

The general character of the business to be transacted by this corporation is:

1. To transact any lawful business for which corporations may be incorporated under the Florida Business Corporation Act.
2. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

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) of common stock, each share having the par value of \$0.00. Authorized capital stock may be paid for in cash, services, or property, at a just value to be fixed by the Board of Directors, of this corporation at any regular or special meeting.

ARTICLE IV.

The amount of capital with which this corporation shall begin business is ONE THOUSAND (\$1000.00) DOLLARS.

ARTICLE V.

This corporation shall have perpetual existence.

ARTICLE VI.

The initial street address of the principal office of this corporation is to be 819 Peacock Plaza, Suite 604, Key West, Florida 33040. The Board of Directors may from time to time designate such other post office address and place for the principal office.

ARTICLE VII.

This corporation shall have three directors initially. The number of directors may be increased from time to time by the by-laws but shall never be less than one. The name and address of the initial director of this corporation is:

<u>NAME</u>	<u>ADDRESS</u>
Troy Wilson	819 Peacock Plaza, Suite 604 Key West, Florida 33040
Sherry Wilson	819 Peacock Plaza, Suite 604 Key West, Florida 33040
David Girard	3101 North Roosevelt Blvd. Key West, Florida 33040

ARTICLE VIII.

The name and address of the person signing these Articles of Incorporation is:

NAME

ADDRESS

Troy Wilson

819 Peacock Plaza, Suite 604
Key West, Florida 33040

ARTICLE IX.

The corporation registered office shall be c/o Robert Goldman. 320 William Street #4, Key West, Florida 33040. The Board of Directors may from time to time designate such other post office address and place for the principal office of its corporation as it may see fit.

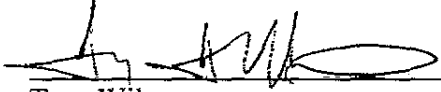
ARTICLE X.

Robert Goldman shall be registered or resident agent of this corporation and his address is 320 #4 William Street, Key West, Florida 33040.

ARTICLE XI.

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by him to the stockholders, and approved at a stockholders meeting by a majority of the stock entitled to vote thereon, unless all of the directors and all the stockholders sign a written statement manifesting their intention, that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 4th day of April, 2003.



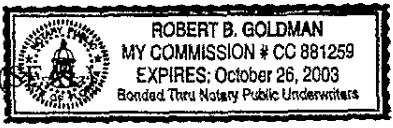
Troy Wilson

STATE OF FLORIDA)
COUNTY OF MONROE)

The foregoing instrument was acknowledged before me this 4th day of
April, 2003, by Troy Wilson. He is personally known to me.



Print Name: Robert B. Goldman
NOTARY PUBLIC
My Commission Expires




CERTIFICATE OF REGISTERED OR RESIDENT AGENT

STATE OF FLORIDA)

COUNTY OF MONROE)

BEFORE ME, this day personally appeared Robert Goldman, who being first duly sworn,
deposes and says as follows:

That I am familiar with and accept the duties and responsibilities as registered agent
for said corporation.


Robert Goldman

SWORN TO AND SUBSCRIBED before me at Key West, Monroe County, Florida, this _____
day of April, 2003.

Print Name: _____
NOTARY PUBLIC STATE OF FLORIDA

Personally known _____ OR Produced Identification _____

Type of Identification Produced: _____

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