Division of Corporat 703000068340

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : INCORPORATETIME.COM, INC.

Account Number : I19990000221

Phone : (631)224-9004 Fax Number : (631)218-9522

FLORIDA PROFIT CORPORATION OR P.A.

TARPON SUPPLIES INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
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6/19/2003 10/2003

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ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION 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:

TARPON SUPPLIES INC.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

11263 LEDGEMENT LN., WINDERMERE, FL 34786

ARTICLE III -SHARES

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

2,000 shares at \$.01 par value

ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President/Director: JAMES TORANO 11263 LEDGEMENT LN., WINDERMERE, FL 34786

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

JAMES TORANO 11263 LEDGEMENT LN., WINDERMERE, FL 34786

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SECRETARY OF STATE
TALLAHASSEE, FLORID

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ARTICLE VI-INCORPORATOR:

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

Kerry Walsh
Incorporatetime.com, Inc.
35-37 Carleton Avenue, Ste 200
Islip Terrace, NY 11752

Kerry Walsh, Incorporator

June 13, 2003

Date

Having been named registered agent and to accept service of process for the above stated corporation as 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.

JAMES TORANO, Registered Agent

Data

SECRETARY OF STATE