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Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

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FLORIDA PROFIT CORPORATION OR P.A.

gillert construction, inc.

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SECRETARY OF STATE DIVISION OF COPPORATION.

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ARTICLES OF INCORPORATION

OF

GILLERY CONSTRUCTION, INC.

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

ARTICLE I NAME

The name of the corporation GILLERY CONSTRUCTION, INC. ARTICLE II PRINCIPAL OFFICE

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

620 N.E. 9TH AVENUE BOYNTON BEACH, FL 33435 ARTICLE III CAPITAL STOCK

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

500 SHARES @ \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the registered agent is (are JAMES GILLERT 620 N.E. 9TH AVENUE BOYNTON BEACH, FL 33435

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

JAMES GILLERT 620 N.E. 9^{TR} AVENUE BOYNTON BEACH, FL 33435

The undersigned has this 23RD day of MARCH, 2005.

Grantone & Pitte Personal 3-23-05

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

- 1. The name of the corporation is: GILLERT CONSTRUCTION, INC.
- 2. The name and address of the registered agent is

 JAMES GILLERT

 620 N.E. 9^{TR} AVENUE

 BOXNTON BEACH, FL 33435

JAMES GILLERT

(corporate officer)

TITLE : PRESIDENT

DATE 3.2

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE NAMED 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.

Tell to - S - 25 - 25

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