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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: BLUE GIANT ENTERPRISES, INC.		
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)	
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:	
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status	
	ADDITIONAL COPY REQUIRED	
FROM: GLENN R. LUISI	(Printed or typed)	
690 LANGTREE ROA	Address	
MOORESVILLE, NC City,	28117 State & Zip	
704-895-0626 Daytime T	elephone number	
DANNY@MEDCAREI E-mail address: (to be use	NC.COM d for future annual report notification)	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME BLUE GIANT ENTERPR The name of the corporation shall be:	ISES, INC.	
Principal office Principal street address 3776 COVENTRY LANE BOCA RATON, FL 33496-4057	Mailing address, if different is:	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
The corporation may transact any and all lawful bus incorporated under the Laws of the State of Florida		
ARTICLE IV SHARES The number of shares of stock is: 1,000 Shares		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: LISA PORUSH - PRESIDENT Address: 3776 COVENTRY LANE BOCA RATON, FL 33496-4057	Name and Title:Address:	
Name and Title:Address:		
Name and Title:Address:	Address:	
ARTICLE VI REGISTERED AGENT	- ω - ω	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the Name: LISA PORUSH	he registered agent is:	
Address: 3776 COVENTRY LANE BOCA RATON, FL 33496-4057		
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is: Name: I ISA PORUSH		
Name: LISA PORUSH Address: 3776 COVENTRY LANE BOCA RATON, FL 33496-4057		
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as regis		
Required Signature/Registered Agent	Date	
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		
7 /2	11/11/10	
Required Signature/Incorporator	Date /	