

From: Fallace & Larkin

To: 18-176381

2/01/2010 10:30

#79 P.00/002

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FALLACE & LARKIN, L.C.
Account Number : I20000000191
Phone : (321) 951-9900
Fax Number : (321) 724-6002

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please**

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

EcoSafari Technologies, Inc.

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$87.50

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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

From: Fallace & Larkin

To: 18506176381

12/01/2010 15:30 #719 P.002/002

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I – NAME

The name of the corporation shall be **EcoSafari Technologies, Inc.**

ARTICLE II – PRINCIPAL OFFICE

Principal **street** address

Mailing address, if different:

502 East New Haven Avenue
Melbourne, FL 32901

N/A

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TALLAHASSEE FLORIDA

ARTICLE III – PURPOSE

The purpose for which the corporation is organized is: to engage in any business authorized under the laws of the state of Florida and the United State of America.

ARTICLE IV – SHARES

The number of shares of stock is 1,000.

ARTICLE V – INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	William J. Broussard, M.D. 502 E. New Haven Avenue Melbourne, FL 32901	President/Vice President
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Name and Title:	Margaret Broussard 502 E. New Haven Avenue Melbourne, FL 32901	Secretary/Treasurer
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ARTICLE VI – REGISTERED AGENT

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

David G. Larkin
1900 S. Hickory Street, Ste. A
Melbourne, FL 32901

ARTICLE VII – INCORPORATOR

The **name and address** of the Incorporator is:

David G. Larkin
1900 S. Hickory Street, Ste. A
Melbourne, FL 32901

Having been named as the registered agent to accept service of process for the above state 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.



(Required Signature/Registered Agent)

November 30, 2010

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 §817.155, F.S.



(Required Signature/Incorporator)

November 30, 2010

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