P95000013545

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE

SUBJECT:	GONAUT EN		INC.		
(Proposed corporate name - must include suffix)					
		9	00001407309 02/15/9501114009 PREFERTS, 75 ******78, 75		
Enclosed is an original and one (1) copy of the articles of incorporation and a check					
for : \$70.00 Filing Fee	\$78.75 \$122 Filing Fee Filing Fee & Certificate & Certified	Fee Filing Fee.	,		
FROM:	Name (printed or ty				
.•	801 HAR	BOR AUG.			
		DN, FLA 3	4222		
	S-13 - 7 a Daytime Telephone n	22 - 7420 number			
	$-\Omega(C)$				

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

ARTICLES OF INCORPORATION

AVISION CE CORPORALIC

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 shall be:

ARGONAUT ENTERPRISES INC.

ARTICLE II PRINCIPAL OFFICE

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

BON HARBOR AVE ELLENTON, FLA. 34222

ARTICLE III SHARES

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

50,000 ShAROS

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

· The name and address of the initial registered agent is:

JOHN T. SCHERDEN 807 HARBOR AVE. ELLENTON, FLA 34202

ARTICLE V INCORPORATOR(S)

The name(s) and tion is(are):	street address(es) of the incorporator(s) to these Articles of Incorpora-
tion istaic),	JOHN J. SCHERDEN
	801 HARBOR AVE.
	ELLENTON, FLA. 34222
	ELLENTON

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

NINTH day of FEBRUARY 19 95.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PUESUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: ARGONAUT ENTERPR	ISES INC
	
2. The name and address of the registered agent and office is:	
JOHN T. SCHERDEN	
(Name)	
807 HARBOR AVE. (P.O. Box not acceptable)	
ELLENTON, FLA. 34222	
(City/State/Zip)	
Having been named as registered agent and to accept service of process for above stated corporation at the place designated in this certificate, I hereby the appointment as registered agent and agree to act in this capacity. I furth to comply with the provisions of all statutes relating to the proper and compande of my duties, and I am familiar with and accept the obligations of my as registered/agent.	or the y accept her agree plete perfor- y position
(Signature) -2/9/75 (Date)	95 FEB 15
	PHI2:33
	- 700