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CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

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Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE 1 1/2% per month on Past Duo Amounts Past 30 Days, 18% per Amoun.

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THANK YOU from Your Capital Connection



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 14, 1995

CAPITAL CONNECTION P.O. BOX 10349 TALLAHASSEE, FL 32302

SUBJECT: KALLERGIS, INC. Ref. Number: W95000008037

We have received your document for KALLERGIS, INC. and che (3) totaling \$122.00. However, your check(s) and document are being returned for the following:

ARTICLES MUST BE PRINTED ON ONE SIDE OF PAPER ONLY...

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

The effective date is not acceptable since it is not within five working days of the date of receipt.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6928.

Agnes Bundick Corporate Specialist

Letter Number: 295A00017227

Corre

(SAMPLE LETTER OF TRANSMITTAL)

Date

Secretary of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Re: Kallersi's Inc.
(name of corporation) Gentlemen: Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50. This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation. Very truly yours, Kullergis (name of corporation) MAILING ADDRESS OF CORPORATION — HoliDay FloriDA 34691

PHONE

Number

(813) 844-3072

Area Code

· >		
ARTICLES OF IN	CORPORATION	
Kallergi's (name of co	·	
(name of co The undersigned subscriber(s) to these Articles of Incorporat corporation under the laws of the State of Florida.		95 APR 19 PH 3: 37 mpetent to contract, hereby form a
ARTICLE I - COR	PORATE NAME	TAFFAHA OER ELDERE.
The name of the corporation is: Kallers,'s	I FN	
ARTICLE II - This corporation shall exist perpetually unless dissolved as	DURATION	
ARTICLE III	-	
The corporation is organized for the purpose of engaging in United States and the State of Florida.		s permitted under the laws of the
ARTICLE IV - CA		
The corporation is authorized to issue Five Hun		
Dollar(s) (\$ /.00) par value Common St	ock, which shall be des	ignated "Common Shares."
ARTICLE V - INITIAL REGIST	ERED OFFICE AND A	IGENT
The street address of the Initial Registered Agent office and	the name of the Initial	Registered Agent at that office is:
NAME ALEX Kullergis		
man and a man		
anner 1	FLORIDA	ZIP 34655
The principal office, if known, or the mailing adress of th		
NAME Simple styles		
ADDRESS 3328 moog RD		
CHY Holipay		ZIP 3469/
ARTICLE VI - INITIAL BE	DARD OF DIRECTORS	
This corporation shall have Three (3) increased or diminished from time to time by the By-Laws, addresses of the initial director(s) of the corporation are a	, but shall never be less	number of directors may be either than one (1). The names and
NAME PETER Kallergis		
ADDRESS 28 w 726 Ray st		
CITY WARRENVI'lle	STATE ICC	incis ZIP 60555
NAME Dick Kallersis		
ADDRESS 4145 Highland LOOP		
CITY NEW PORT Richy	STATE FOR	SPA ZIP 34652
NAME ALEX Kallergi's		
ADDRESS 3343 MURROW ST		
CITY NEW PORT RICHY	STATE FLORE	'DA ZIP 34655

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FORM 215: ARTICLES OF INCORPORATION, PAGE 1

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

up)

NAME PETER Kullergi's		
ADDRESS 28 W 726 Ruy St		
CHY Warrenville	STATE ILLINOIS	71P 60555
NAME NICK Kallersi's		
ADDRESS 4145 Highland Loop		
CITY NEW PORT Richy	STATE FORIDA	ZIP 34652
NAME ALEX Kallersis		
ADDRESS 3343 MURROW ST		
CITY NEW PORT Richy	STATE Florida	ZIP 3/6:3

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this $\frac{18}{19}$ day of $\frac{19}{10}$, $\frac{19}{10}$.

Al Ko	lear	(Scal
Niex	L'allengis	(Scal)
al	hallyi	(Scal)

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

95 APR 19 PH 3: 37
SELLIE WAY OF STATE
TALLAHASSEE FLORIDA

Kullerg's Inc

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 33 43 muRRow st

wew port Richy, Florian, 34655

has named Alex Kullergi's

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

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