47837 SS JIN 16 PHIZ: 17 SS JIN TRANSMITTAL LETTER

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

4000011515574 -06/16/95--01078--007 *****78.75 *****/8.75

SUBJECT:	(Proposed corporate na	SERVIA me - must include su	
Enclosed is an origina for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	of the articles of \$122.50 Filing Fee & Certified Copy	incorporation and a check 3131.25 Filing Fee, Cordied Copy & Cerdicate
FROM:	107-B	inted or typed) BENT	ARROW DRIVE
	(401)	State & Zip 144-27. Ilephone number	53458 52 SDC

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

ARTICLES OF INCORPORATION

SELECTION 16 PHIZ: 17

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:

GMO SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

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

HUL W. INBIANTEUN PB JUPITER, FL 33458

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GAYLE M. DIXON 101-13 BENT ARROW DR.

JUPITER, FL 33458

ARTICLE V INCORPORATOR(S)

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

GAYLE M. DIXEN 181-13 BENT ARROW DRIVE-JUPITER, FL 33458

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

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or \$17.0501, 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:_

GMD SERVICES INC

2. The name and address of the registered agent and office is:
GAYLE M. Dixel
107-13 BENT HEROW DRIVE
(P.O. Box not acceptable)
(City/State/Zip)
Having been named as registered agent and to accept service of process for the above stated 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.
(Signature) (Date) (Pare) (Par
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