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

SUBJECT:	Kamy's Ark. (Proposed corporate	Inc. nama - must include su	uffix)		
Enclosed is an <b>ori</b> gi	val and one /1) c	any of the articles	of incorporation	and a abank	
for:  \$70.00  Filing Fee  FROM	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop  Rosetto, Esq. (printed or typed)	\$131.25 Filing Fee, Certified Copy & Certificate	SECRETARY OF STATE TALLAMASSEE, FLORDA	FILED
	-1111-Peppe Boca Raton	eridge Terrace. Address		©0000 -01/11/96 ******78.75	1 5365 1 8 01036013 *****78.75
	<u> 407–347–63</u>	309 or 954-975. Telephone number	5667		

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

## ARTICLES OF INCORPORATION

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:

Kamy's Ark, Inc.

ARTICLE II PRINCIPAL OFFICE

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

23273 New Coach Way Boca Raton, FL 33433

ARTICLE III SHARES

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

1,000 No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Kamy Reid 23273 New Coach Way Boca Raton, FL 33433

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) r id street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Kamy Rold 23273 New Coach Way Boca Raton, FL 33433

I ue min	ersiRited li	icorporator(s) nas(i	nave) executed these Afficies of the	corporation ti
8	_ day of .	January	, 19 <u>96</u>	
		10		
	_	Kamy/Reid	Signature	
	_		Signature	
	_		Signature	<del></del>

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

ì.	The name of the corporation is: Kamy's Ark, Inc.		<del></del>
2.	The name and address of the registered agent and office is:	SEC TALL	
	Kamy Reid (NAME)	HILL JAN 11 RETARY AHASSE	]
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	ED 8: 43	
	Boça Raton, FL 33433 (CHY/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.

Kamy Reid (SIGNATURE) (DATE)