P96000059279 TRANSMITTAL LETTER

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

SUBJECT: GALL	EON ENTERPRISE	s, inc.			
	Proposed corporate n	ame - must include si	uffix)		
Enclosed is an original for :	and one (1) copy	of the articles of	-	∩7/16/90-+ ******78.75	#955666 01009014 *****78.75
‡70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	\$122.50 Filing Fae & Cerdified Copy	Filing Fee, Certified Copy & Certificate		
FROM:	Barry E. Dic	kson, CPA			
		Place, Suite	С	Ās	S
		Address		ECRE	36 JUL 98
	Pensacola, City,	FL 32501 State & Zip		ARY OF STATE ASSEE FLORIDA	5 F
	(904) 438-23	122		S TA LORI	C) .4.29
	Daytime Te	lephone number		ᇢᆏ	<u>w</u> ''''''

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

GB 7/16/96

ARTICLES OF INCORPORATION 96 JUL 15 AH ID: 31 SECRETARY OF STATE TALLAHASSEL FLORIDA

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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 | NAME

The name of the corporation shall be:

GALLEON ENTERPRISES, INC.

ARTICLE IL PRINCIPAL OFFICE

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

5655 Firestone Drive Pace, FL 32571

ABTICLE III SHARES

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

Ten Thousand (10,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Anthony Devito 5655 Firestone Drive Pace, FL 32571

ARTICLE V INCORPORATUR(8)

The name(s) and streat address(es) of the incorporato/(s) to these Articles of incorporation is(are):

Anthony Devito 5655 Firestone Drive Pace, FL 32571

he undersigned	incorporator(s)	has(have) exec	uted these Articles	of Incorpor	ation th
8th	day of	July	, 19_96_	···· •	
16	Tue hor				
		Signature			
		Signature		······································	
-		Sindature	——————————————————————————————————————		

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT 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 corpor	ation is: <u>Galleon Enterprises.</u>	INC.		
2. The name and address of the registered agent and office is:			SECRE	1 96 JUL	CLECKER TO	
	ı	Anthony D	evito	HASSE	5	170284
		•	(Name)	SEE SEE		5 1
		5655 Fire	stone Drive	EFLE EFLE	AH 10: 31	- Carren
	·		(P.O. Box not acceptable)	LORIDA	<u> </u>	TAIM
		Pace, FL	32571	بعزقه		
			(City/State/Zin)			

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.

(Fignature)