# P9600062850

# TRANSMITTAL LETTER

Department of State Division of Chirporations P. O. Box 6327 Tallahastin, FL 32314

SUBJECT:GIO	COM, INC.					
	Proposed corporat	e name - must include suffix)	. IS IDD (2001 1 Store) St -01725/960106200 *****78.75 *****78			
Enclosed is an originator:	inal and me (1) copy of the articles of incorporation and a check					
\$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	#122.50 #131.29  Filing Fee Filing Fee, Certified Copy & Certified Copy & Certificate  Additional Copy Required	ov			
FROM:	LOUIS GIOCONDO					
	Name (printed or typed)		38 36			
	13140 111TH LANE N					
	Address		HASS TIME			
	LARGO, FLORIDA 34648					
	City, State & Zip (813) 522-9539		STATE LORIDA			
		Telephone number  RETURN CON	, of			
ARTICLE	of !	RETURN COPY				

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

637/26/96

## ARTICLES OF INCORPORATION

96 JUL 25 PH II 11

SECRETARY OF STATE FALLAHA'S FE FLORIDA

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.

> ARTICLEI NAME

The name of the corporation shall be:

GIOCOM, INC.

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

> 13140 111th LANE N. LARGO, FLORIDA 34648

> > ARTICLE III **SHARES**

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

ONE HUNDRED

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

> LOUIS J. GIOCONDO 13140 111th LANE N. LARGO, FL. 34648

#### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

LOUIS J. GIOCONDO, PRESIDENT & SECRETARY 13140 111th LANE N. LARGO, FL. 34648

DAVID R. WILSON, VICE PRESIDENT & TREASURER 1512 BEAGULL DRIVE #201 PALM HARBOR, FL. 34685

15\_ day of \_\_ JULY , 19 96

(An additional article must be added if an effective date is requested.)

Signature

### Notarization is not required

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

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/RECISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LATTS 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:	GIOCOM, INC.	
2. The name ar	nd address of the regi	stered agent and office is:	
	LOUIS J. G 13140 111t LARGO, L.	IOCONDO h Lang n	SECRE TALLAN
	(P.O. Bo	ox or Mail Drop Box NOT ACCEPTABLE)	ASSET
	largo, fla	ORIDA 34648 (CITY/STATE/ZIP)	PN 4: 12 OF STATE FLORIDA

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) 7/28/96
(DATE)