

P96000100332

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

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

FILED
 96 DEC 12 AM 11:57
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

AL DEC 1 2 1996

| REQUEST | TAKEN | CONFIRMED | APPROVED |
|---------|-------|-----------|----------|
| DATE | 12/10 | | |
| TIME | | | CK No. |
| BY | | | |

WALK-IN Will Pick Up 1:00 *[Signature]*

RE: Karl of Ocala, Inc.

| | C.C. FEE. | DISBURSED |
|--|---------------------|-----------|
| <input checked="" type="checkbox"/> Capital Express™ | | |
| <input type="checkbox"/> Art. of Inc. File | | |
| <input type="checkbox"/> Corp. Record Search | | |
| <input type="checkbox"/> Ltd. Partnership File | | |
| <input type="checkbox"/> Foreign Corp. File | | |
| <input checked="" type="checkbox"/> () Cert. Copy(s) <u>2000082025072-4</u> | | |
| | -12/10/96-01125-025 | |
| <input type="checkbox"/> Art. of Amend. File | ***857.50 | ***122.50 |
| <input type="checkbox"/> Dissolution/Withdrawal | | |
| <input type="checkbox"/> C U S- | | |
| <input type="checkbox"/> Fictitious Name File | | |
| <input type="checkbox"/> Name Reservation | | |
| <input type="checkbox"/> Annual Report/Reinstatement | | |
| <input type="checkbox"/> Reg. Agent Service | | |
| <input type="checkbox"/> Document Filing | | |
| <input type="checkbox"/> Corporate Kit | | |
| <input type="checkbox"/> Vehicle Search | | |
| <input type="checkbox"/> Driving Record | | |
| <input type="checkbox"/> Document Retrieval | | |
| <input type="checkbox"/> UCC 1 or 3 File | | |
| <input type="checkbox"/> UCC 11 Search | | |
| <input type="checkbox"/> UCC 11 Retrieval | | |
| <input type="checkbox"/> File No.'s, Copies | | |
| <input type="checkbox"/> Courier Service | | |
| <input type="checkbox"/> Shipping/Handling | | |
| <input type="checkbox"/> Phone () | | |
| <input type="checkbox"/> Top Priority | | |
| <input type="checkbox"/> Express Mail Prop. | | |
| <input type="checkbox"/> FAX () pgs. | | |

SUBTOTALS _____

| | |
|--------------------------------|----------|
| FEE..... | \$ _____ |
| DISBURSED..... | \$ _____ |
| SURCHARGE..... | \$ _____ |
| TAX on corporate supplies..... | \$ _____ |
| SUBTOTAL..... | \$ _____ |
| PREPAID..... | \$ _____ |
| BALANCE DUE..... | \$ _____ |

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 15% per Annum.

THANK YOU
 from
 Your Capital Connection



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 10, 1996

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

SUBJECT: KARL OF OCALA, INC
Ref. Number: W96000025926

We have received your document for KARL OF OCALA, INC and your check(s) totaling \$857.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE ENCLOSED DOCUMENTS ARE ILLEGIBLE AND CAN NOT BE FILED.
PLEASE TYPE OR PRINT LEGIBLE.

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 Lunt
Corporate Specialist

Letter Number: 896A00055202

*corrected
I have*

RECEIVED
96 DEC 12 AM 10:03
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION FILED

96 DEC 12 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, 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.

ARTICLE I NAME

The name of the corporation shall be:

Karl of Ocala, INC.

ARTICLE II PRINCIPAL OFFICE

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

11991 NE Ave
Anthony, Fl. 32617

ARTICLE III SHARES

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

100 shares
Par Value 1\$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Donna R. Botero
11991 NE 14 Ave.
Anthony, Fl. 32617

ARTICLE V INCORPORATOR(S)

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

Carlos Alberto Meyer
11991 NE 14 Ave
Anthony, Fl 32617

Donna R. Botero
11991 NE 14 Ave.
Anthony, Fl. 32617

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

10 day of December, 1996.

Donna R. Botero
Signature

Signature

Signature

Articles of Incorporation

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 corporation is: Karl of Ocala, INC

2. The name and address of the registered agent and office is:


Donna R. Botero,
(Name)

11991 NE 14 Ave.
(P.O. Box not acceptable)

Anthony, FL 32617
(City/State/Zip)

FILED
96 DEC 12 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, 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.

 12-10-96
(Signature)