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

200002056722--6 -01/14/97--01071--008 *****78.75 ******78.75

SUBJECT: // Siles / Hor / Mu (Proposed corporate name - must include suffix)							
			•				
Enclosed is an original	and one(1) copy of the article	es of incorporation and a	check for :				
□ \$70.00 Filing Fœ	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate				
		ADDITIONAL COPY REQUIRED					
FROM:	David Name (Printe	dor typed)	97 JAN TÄLLAN				
***************************************	IDUS LA	27 = 15s	δος Δ				
	Clerno City, State	e & Zip	SEE, FLORIE				
352 - 242-0401							

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business

Composition Act, benefit adont(s) the following Articles of Incorporation Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLEI

The name of the corporation shall be:

Kieshelthor, anc.

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

> 1011 S. Agw 27 Clermont, F1. 34711

> > ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time 100

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

DAVID Vopnford 1011 S. Haw 27 Clermont, Fl. 34711

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):

DAVID Vopnford 1011 S. LIGN 27 Clermont, Il 34711.

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

8 th day of January , 19 97

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

Signatur

Signature

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/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.

1.	The name of the corporation is: KIC Shel Hook	Onc.	
		SE TAL	2
2.	The name and address of the registered agent and office is:	DRETAL Allas	_ =====
	DAVID T. Vaporford	SEE-FL	ŧi
	(P.O. Box or Mail Drop Boy NOT ACCEPTABLE)	JE I /	
	Clermont Il 34	211	

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)