P910 (RAHEMINTAI) LT (ER) C 55

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

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SUBJECT: A	OTARES CORON	ate name - must include suff	iix)	_
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: Udu	THIA A. CODWAY			•
0	Name (Printe	d or typed)		
350		0 #D	SEC TALL	3
	Addr	CSS	CRETARY LAHASSE	
SA	RASOTA, FL City, Stat	34037 • & Zip		
Λ.		-	OF STA	;

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

Daytime Telephone number

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:

AUTARES GROUP, luc.

SECRETARY OF STATE
SECRETARY OF

ARTICLE II PRINCIPAL OFFICE

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

3549 CHESHIRE SQ. # D SARASOTA, FL 34237

ARTICLE III SHARES

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

500 WITH A PAR VALUE OF \$100 PER SHARE

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

Cynthia A. Couway 3549 Cheshire So. #D Sarasota, FL 34037

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):

Cypthia A. Codead 3549 CHESHIRE SQ. #D SARASOTA, FL 34337

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
alon day of JANUARY, 19 97.
(An additional article must be added if an effective date is requested.)
Cyclis de Convactor
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	AUTARES GROUP, LUC	·
2. The name and address of the reginal of the regin	istered agent and office is: A. COWAU (NAME) HESHIRE SO. # D Box or Mail Drop Box NOT ACCEPTABLE) TA F 3437 (CITY/STATE/ZIP)	SECRETARY OF STATES
	·	

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)