TRANSMITTAL LETTER

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

ANNKARGE & ASSOCIATES, INC. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an orginal and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee Filing Fee & Certificate &Certified Copy Certified Copy & Certificate **Additional Copy Required** ANN KARGE

Name (printed or typed) FROM: 2624 ATTLEBORO PL.
Address Apopka, FL. 32703 City, State & Zip (407) 788-8726

Daytime Telephone number

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

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:

ANN HARGE & ASSOCIATES, INC.

ARTICLE II PRINCIPLE OFFICE

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

2624 ATTLEBURO PL. APOPKA, FL. 32703

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANNH'KARGE 2624 ATTLEBORD PL. APOPKA, FL. 32703

FILING FEE: \$70.00

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):

ANN'KARGE 2624 ATTLEBORD PL. APOPKA, FL. 32703

ROBERT KARGE
2624 ATTLEBORD PL.
APOPKA, FL. 32703
ALLYSON KARGE
2624 ATTLEBORD PL.
APOPKA, FL. 32703

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

28 day of January , 1997.

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

Signature Signature

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: ANNKARGE & ASSOCIATE	.S,ZA	VC.	
2.	The name and address of the registered agent and office is:			
	ANN KARGE	1741 035 850	97	
	(Name) 2624 ATTLEBORO PL.	RETARY AHASS	JAN 30	FILE
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	E P	뫋	ED
	APOPKA FL. 30703	ORI	ယ ()	
	(City/State/Zip)	Þ	ထ်	

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) 1/28/97 (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314