DATION SAR SOLVER STEER STEER

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

900002091189——8 -02/18/97--01111--002 *****122.50 ****122.50

SUBJECT:	<u> </u>	Kana	Manar	Inc.	
	(2)	oposed co	rporate name	- must include suffix)	

•	and one (1) co	py of the articles of incorporation a	nd a check
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	
FROM:	Joy M Name 3624 NA		?\F\ 97FEB ôlvisio; oF
Nill		Address 2	RECONVED 97FEB 18 PH 3: 08 Visign of Corporatio

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



ONSERFERENCED

97 FEB 18 PH 3: 20

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:

SYLKANA MANDR, INC.

ARTICLE II PRINCIPAL OFFICE

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

3624 NW 12th Avenue Gamesville, Florida 32602

ARTICLE III SHARES

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

100

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

JOY M. CHARLES-PAULAS 3624 NW 12th Avenue Gamesville, Florida 32605

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):

Gloria Bourne 3624 NW 12th Avenue Gaviesville, Florida 32605

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

18th day of February, 19 97.

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

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: SylKana Manar, Inc
2.	The name and address of the registered agent and office is:
	Joy M. CHARLES-PAULAS
	3624 NW 12th Avenue (P.O. Box of Mail Drop Box NOT ACCEPTABLE)
	Parievelle Florida 32605

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.

7 (CITY/STATE/ZIP)

Joy of Cealer-Paules 2/18/97 (SIGNATURE) (DATE)