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ORDER DATE	: May 2, 1997	
ORDER TIME	: 9:30 AM	
ORDER NO.	: 352379-005	500002173045
CUSTOMER NO): 81557A	
CUSTOMER:	Mark F. Mooney, Esq. MARK F. MOONEY, ESQ	
	1211 W. Fletcher Avenue	97 MAY SECRETALLAH
	Tampa, FL 33612	97 HAY 19 SECRETALLAHASSE
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EFFECTIVE DATE:

CIMON, INC.

X ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP	ROISIA	97 KAY	7. 11
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	0 33	-9	
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	CORPORATI	05 :OI KV	
CONTACT PERSON: Gail L. Shelby EXAMINER'S INITIALS:5	⊭		

ARTICLES OF INCORPORATION

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SECINE STATE TALLAHASSEE FLORIDA

CIMON, INC.

The undersigned, for the purpose of forming a Corporation under the Florida Business Corporations Act, does hereby adopt the following Articles of Incorporation.

Article 1 - Name & Place of Business

The name of this Corporation is **Cimon**, **Inc.** The principal place of business of this Corporation shall be 3837 Northdale Blvd., Suite 354, Tampa, Florida, 33624, or such other place as may be designated by the Board of Directors.

Article 2 - Commencement Date & Term of Existence

The Corporation shall commence as of May 9, 1997 and shall have perpetual existence.

Article 3 - Capital Stock

The Corporation shall have the authority to issue 8,000 shares of common stock, no par value.

Article 4 - Initial Registered Office and Agent

The street address of the initial registered office of this Corporation is 3837 Northdale Blvd., Suite 354, Tampa, Florida, 33624. The initial registered agent of this Corporation is Amanda Cimon.

Article 5 - Incorporator

The name and address of the person signing these Articles as the incorporator is:

Amanda Cimon 3837 Northdale Blvd., Suite 354 Tampa, Florida 33624

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation, this ____ April, 1997.

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing Articles of Incorporation were acknowledged ______ day of April, 1997 by Amanda Cimon, who is personally known to me or who has produced a Florida Drivers License as identification and did not take an oath.

of Notary

(Printed Name of Notary)

NOTARY PUBLIC

State of Florida At Large

My Commission Expires:



MARY L. COSTELLO MY COMMISSION # CC361965 EXPIRES April 6, 1998 BONDED THRU TROY FAIN INSURANCE, INC

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THESE ARTICLES OF INCORPORATION, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.0505 FLORIDA STATUTES.

Registered Agent

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