## -: P97000068979

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

SUBJECT:	DRILL, IN	٥		_
	(Proposed co	orporate name - must include	e suffix) 「ハルリコ2275 』 08/08/97 *******78, 75	01024 <del>0</del> 01
Enclosed is an original a	and one(1) copy of the article	s of incorporation and a c	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	<u>.</u>
FROM: _	POLINA KI	HMARIN vinted or typed)		
_	3321 W.	UVOMID6- Addreps	· CiecLE	
-	TAMPA, City,	FL 33 State & Zip	6// DIV	97
-	(813) 837 Daytime 7	7-8625 Telephone number	LLAHASSI	# <del>T</del> =
			ji:-'9ration' ee, florida	ED 84:5 H3

NOTE: Please provide the original and one copy of the articles. -889

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

## ARTICLE I NAME

The name of the corporation shall be:

FLORILL, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3321 W. WYONING CIRCLE TAMPA, FL 33611

ARTICLE III SHARES

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

1,000

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

POLÍNA KHMARIN 3321 W. WYOMING CIRCLE, TAMPA FL 33611

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

REGINA A. FAKTOROVICH 342 E. FOX HILL DR

BUFFALO Grove, ILL 60089
Permatarian 7/29/9Signature/Incorporator Date

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

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/Registered Agent

7/29/97