TO 619544369805 P002 TRANSMITTAL LETTER Department of State Division of Corporations P O. Box 6327 Tallahassee, FL 32314 GARD TPARTNETS FROM PORTA HO

(Proposed corporate name - must include suffix) SUBJECT: Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 Filing Fee \$131.25 **\$122.50** \$78.75 Filing Fee Filing Fee. Filing Fee Certified Copy & Certificate & Certified Copy & Certificate ADDITIONAL COPY REQUIRED -ABRIEC FROM: MITAMAT City, State & Zip 954-436-38.05 Daytine Telephone number CORRECT ant 1 7

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

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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
The name of the corporation shall be GART RES INCORPORT AL
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be 13400 SW.19 ST MICAMAC, FL 33027
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 Shares
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:
Gabriel Rosado 13400 S.W. 19 19 St
MINOMOV, FL 33037 ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
GABRIEL ROS ADO
13400 5019 57
MITAMAT (PL 33027
1 alon 0 Kosto 8/22/97
Signature/Incorporator / REGISTERED AGENT 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 Date