P980000 4896

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

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SUBJECT:CA	ARIN BOG Proposed corporate n	ART, UC.	ix)		
Enclosed is an origin	al and one (1) co	p y of the articles of	incorporation a	and a preck	an JAN
for: \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	ARY OF STATE ASSEE, FLORIDA	15 AM 7: 41
FROM	Name	IN BOGART (printed or typed)		,	
	983 PLA	Address VTATION FZ. ity, State & Zip	3332Y	5/	
	95 Daytime	Y - 47 Y - 1731 e Telephone number			
	r. Chessel	JAN 1 6 1998			

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:

CARIN BOGART, INC.

ARTICLE II PRINCIPAL OFFICE

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

9835 NW 380CT. PLANTATION, FL 3332Y

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:

JEFF BOGART 9835 NW 3rd CT. PLANTATION, FL 3332Y

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):

1) CARIN BOGART, PRESIDENT 9835 SW 3RD CT. PLANTATION, FL 33324

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this	
10 day of JANUARY, 19 98.	
(An additional article must be added if an effective date is requested.)	
Cari Boyne Signature	
l .	
, 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: CARIN BOGART / NC,		•
2.	The name and address of the registered agent and office is:	98 JAN SLORE TALLAH	-11
	JEFF BOGART (NAME)	TARY OF AM	
	9835 S(J) 3 PC CT, (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	7: 42 LORIDA	
	PLANTATION F. 3332Y (CITY/STATE/ZIP)		

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)

(DĂTE)