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JAN 20 AN 10: 37

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA 500002404635—6 -01/20/98--01051--020

Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 **⊠** \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee, Filing Fee & Certified Copy Certified Copy & Certificate & Certificate ADDITIONAL COPY REQUIRED 1209 PARKGREN PZ Address WINTER PARK FLORIDA 32789 City, State & Zip (401) 628-8501 Daytime Telephone number 784 5 3 1689 ±

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

P. Hall

FILED

ARTICLES OF INCORPORATION

98 JAN 20 M 10: 37

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

ARTICLE I NAME

The name of the corporation shall be:

KAR-BREHA INC

ARTICLE II PRINCIPAL OFFICE

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

1209 PARKGREENPL WINTER PARK FLORIDA 32789

ARTICLE III SHARES

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

1,000,000 DONALDT, MADISON 1,000,000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

DONALDT. MAJISON 1209 PARKGREEN PL WINTER PARK FLORIDA 32789

ARTICLE V INCORPORATOR

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

DONALD T. MAGISON 1209 PARK GREEN PL WINTER PARK FLORIDA 3278 9

Signature/Incorporator

JANUARY 15 1998

(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

JAZVARY 15