

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 98 FEB -5 AN 12: 07 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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FEB - 5 1998

P Hall

SUBJECT:	CIARAN, INC.		****131.25 ****131		
	(Proposed corp	orate name - must include su	ffix)		·
Enclosed is an original a	nd one(1) copy of the articl	es of incorporation and a	check for :		
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate & Certified Copy		Sil \$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUI	Sign 2	Marine Marine
FROM:	JOAN McGHEE				E E E
	Name (Printed or typed) 4 JOSEPH DRIVE			IEB -5 PMI2: 03 ON OF CORPORATION	• " »
	Address			O3 ATTON	O
	LINCROFT, NEW JERSEY 07738				
	City, State & Zip				
	908-219-0543				
	Daytime Telephone number				

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

ARTICLES OF INCORPORATION

FILED

FEB -5 PM 12: 07

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I

The name of the corporation shall be:

CIARAN, INC.

ARTICLE II PRINCIPAL OFFICE

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

2870 APALACHEE PARKWAY TALLAHASSEE, FL 32301

ARTICLE III SHARES

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

ONE-HUNDRED (100)

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOAN McGHEE 2870 APALACHEE PARKWAY TALLAHASSEE, FL 32301

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

JOAN McGHEE 2870 APALACHEE PARKWAY TALLAHASSEE, FL 32301

(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