P98000034941

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

SUBJECT:	(Proposed corp	SARSON, INC. orate name - must include su	- ffix)	
		-	40000248: -04/15/98- ******78.7	9314 - -010410 5 *****7
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	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Name (18049 SAII LUTZ, F City B13-966	Printed or typed) Find Dr. Address 33549 State & Zip Telephone number	SECRE MARY OF STATE TALLAHASSEE, FLORIDA	98 APR 15 PM 3: 07
M 4/16/				

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

FILED

ARTICLES OF INCORPORATION

98 APR 15 PM 3: 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:

JOEY KARSON, INC.

ARTICLE II PRINCIPAL OFFICE

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

3959 VAN DYKE Rd #306 LUTZ, FL 33549

ARTICLE III SHARES

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

25 Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

STUART DAVIDSES 18049 SAILFISH DC LUTZ, FL 33549

INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

STUART DAVIDSON 18049 SAILESH DE LUTZ, FL 33549

Signature/Incorporator

(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

4-12-98 Bata