## P98000053582

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

		2	-06/12/98 *****70.00	
losed is an original a	nd one(1) copy of the article	es of incorporation and a	check for :	<b></b>
\$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	DIVIG SEC
FROM:	Craig Balle	HC Printed or typed)		· · · · · · · · · · · · · · · · · · ·
-	3502 White	Birch CT Address		REPORATION 8: 38
	EAU CLAUPE, City,	Wi SY70/ State & Zip	<del></del>	B NS
	715-830-	0290		

(0)

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

Daytime Telephone number

## 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.	SECRE 98 JI
ARTICLE I NAME The name of the corporation shall be: TriAo International Enterprises, INC.	98 JUN 12 AM 8:38
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:	A 8138
6416 Foxogrape Lane Bradenton, Fl 34202	
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time  100 Shares of Common Stock at No PAV Value	e is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:	
Craig Balliette 6416 Foxgrape Bradenton, Fl. 3	Lane 4202
The name and address of the incorporator to these Articles of Incorporation are:  Craig Balliete  6416 Fotgrape Lane  Bradenton, Fl. 34202	
Atule II Effective Date: September 1 1998 6/1/98	······································
Signature/Incorporator 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