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FAX AUDIT NO: H98000011527

6/22/98

FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: LLOYD GRANET

ACCT#: 074632001025

CONTACT: LLOYD GRANET

PHONE: (561)368-3575

FAX #: (561)447-0701

NAME: TRI GRAN GROUP, INC.

AUDIT NUMBER.....H98000011527

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0 PAGES..... 4

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Lloyd Granet, Esq., P.O. Box 6189, Boca Raton, FL 33427

Ph. 561-447-0700 - Fax 561-447-0701, Florida Bar No. 525431

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**ARTICLES OF INCORPORATION
OF
TRI GRAN GROUP, INC.**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I. NAME

The name of the corporation is TRI GRAN GROUP, INC.

ARTICLE II. PRINCIPAL OFFICE

The principal place of business address and mailing address of this corporation shall be 5200 Town Center Circle, Suite 302, Boca Raton, FL 33486.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is 1,000 shares of common stock having a par value of \$1.00 (one dollar) per share.

ARTICLE IV. REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The name of the initial registered agent whose business office is identical to the registered office is Lloyd Granet.

The address of the registered office of the corporation is 5200 Town Center Circle, Suite 302, Boca Raton, FL 33486.

The Board of Directors may from time to time move the registered office to any other address in the State of Florida.

ARTICLE V. BOARD OF DIRECTORS

The Corporation shall have one director. The number of directors may be increased or diminished from time to time, as provided in the bylaws adopted by the shareholders, but shall never be less than one.

ARTICLE VI. INITIAL DIRECTORS

The name of the initial director of this Corporation and his street address are: Scott Granet, 5200 Town Center Circle, Suite 302, Boca Raton, FL 33486.

ARTICLE VII. INCORPORATOR

The name and street address of the person signing these Articles of Incorporation is: Lloyd
Lloyd Granet, Esq., P.O. Box 6189, Boca Raton, FL 33427
Ph. 561-447-0700 - Fax 561-447-0701, Florida Bar No. 525431
AUDIT NUMBER -H98000011527

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Granet, 5200 Town Center Circle, Suite 302, Boca Raton, FL 33486.

ARTICLE VIII. AMENDMENT.

These Articles of Incorporation may be amended in the manner provided by law.

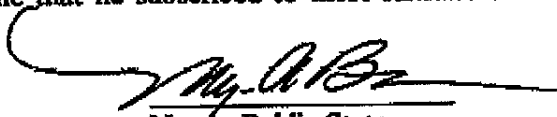
In witness whereof, the undersigned as Incorporator, has executed these Articles of Incorporation on the date set out below.


Lloyd Granet
Incorporator


Date

**STATE OF FLORIDA
COUNTY OF PALM BEACH**

Before me, a Notary Public, personally appeared Lloyd Granet, who is to me known to be the person described, who is personally known to me, as Incorporator and who executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to these Articles of Incorporation on the date set out above.


Notary Public State
of Florida at Large
Commission expiration:

(Notary Seal)



Myra A. Ballou
MY COMMISSION # CC717079 EXPIRES
May 16, 2002
BONDED THRU TROY FARM INSURANCE, INC.

**Lloyd Granet, Esq., P.O. Box 6189, Boca Raton, FL 33427
Ph. 561-447-0700 - Fax 561-447-0701, Florida Bar No. 525431
AUDIT NUMBER -H98000011527**

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**CERTIFICATE OF DESIGNATION
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: TRI GRAN GROUP, INC..
2. The name and address of the registered agent and office is:
Lloyd Granet
5200 Town Center Circle, Suite 302, Boca Raton, FL 33486

SIGNATURE: _____

Lloyd Granet

DATE: June 22, 1998

HAVING BEEN NAMED AS REGISTERED AGENT 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: _____

Lloyd Granet

DATE: June 22, 1998

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Lloyd Granet, Esq., P.O. Box 6189, Boca Raton, FL 33427
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