COOO0539

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

SUBJECT: J.A. Karr Associates, Inc. (Proposed corporate name - must include suffix)			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	
FROM:	David H. Miller Name (P	rinted or typed)	

36700 Woodward Avenue, Suite 203 Address Bloomfield Hills, MI 48304-0930 City, State & Zip 645-9076 Daytime Telephone number

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

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.

ARTICLE I NAME

The name of the corporation shall be: J.A.Karr Associates, Inc.



ARTICLE II PRINCIPAL OFFICE

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

8652 Escondido Way East, Boca Raton, Florida 33433

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jeffrey Karr 8652 Escondido Way East Boca Raton, FL 33433

ARTICLE V INCORPORATOR

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

David H. Miller 36700 Woodward Avenue, Suite 203 Bloomfield Hills, MI 48034-0930

Signature/Incorporator

9-28-988

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

9-28-98

Date