

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

0/2		-
3800		
	بي	0, 9

SUBJECT:		ASSOCIATES ate name - must include suf	fix))	
•		31	00002663335 -10/14/9801031002 *****87.50 *****87.5	
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	□\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & 70.26 & Certificate 9.75 PY REOUIRED \$7.50	
FROM: KENNETH L. HAWTHORNE Name (Printed or typed)				
2116 EMBASSY DR Address				
_	WEST POL	M BEACH, F State & Zip	7/ 33401	

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

S61 - 7/Z - 1/8Z

Daytime Telephone number

98 OCT 14 PM 3: 07

ARTICLES OF INCORPORATION

<u>NAME</u>

The name of the corporation shall be:

<u>ARTICLE</u> I

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

The name of the corporation shall be:
K.L.H. W-ASSOCIATES, INC.
ARTICLE II PRINCIPAL OFFICE
The mineral place of business and mailing address of this corporation shall be:
A 116 EMBASSY DR WEST PACM BEACH, FL 3340 ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100 SHARES
The name and Florida street address of the initial registered agent are: KENNETH L. HAWTHORKE 2-116 EMBRSSY DR. WEST POLM BEACH, FL 33401
The name and address of the incorporator to these Articles of Incorporation are:
KENNETH L. HAWTHORNE 2116 EMBOSSY DOZ WEST POLMBEOCH, FL 33401
Signature/Incorporator 10/10/98 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