

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

800002704709--2  
-12/07/98-01108-005  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: GENSYS TECHNOLOGIES, 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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: CAROLYN NOONAN  
Name (Printed or typed)

4962 NW 106 WAY  
Address

CORAL SPRINGS, FL 33076  
City, State & Zip

954-846-3769  
Daytime Telephone number

FILED  
98 DEC -7 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

ARTICLES OF INCORPORATION

THE UNDERSIGNED, acting as incorporator of a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I

The name of the corporation is GENSYS TECHNOLOGIES, INC.

ARTICLE II

The principal place of business and the mailing address of This corporation shall be: 4962 NW 106 Way  
Coral Springs, FL 33076

ARTICLE III

The corporation shall have authority to issue 3,000 shares of common stock, \$0.01 par value.

ARTICLE IV

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

Carolyn Noonan  
4962 NW 106 Way  
Coral Springs, FL 33076

ARTICLE V

The name and address of the incorporator is:

Carolyn Noonan  
4962 NW 106 Way  
Coral Springs, FL 33076

FILED  
98 DEC -7 PM 2:09  
TALACHASSEE FLORIDA  
SECRETARY OF STATE

Carolyn M. Noonan

Signature of Incorporator

12/4/98

Date

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.

Carolyn M. Noonan

Signature of Registered Agent

12/4/98

Date