

TRANSMITTAL LETTER

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

000002771230--6  
-02/10/99--01031--005  
\*\*\*122.50 \*\*\*\*78.75

SUBJECT:

*Carillon Group USA 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

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

*LISA COLLINS*

Name (Printed or typed)

*10117 W Oakland Park Blvd, #415*

Address

*Sunrise, FL 33351*

City, State & Zip

*954-749-9300*

Daytime Telephone number

FILED  
99 FEB 10 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BROCK FEB 12 1999

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

ARTICLES OF INCORPORATION

OF

***CARILLON GROUP USA INC.***

The undersigned subscriber to these Articles of Incorporation,  
a natural person competent to contract, hereby forms a corporation  
under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

***CARILLON GROUP USA INC.***

The principal place of business of this corporation shall be  
10117 W OAKLAND PARK BLVD, SUITE 415, SUNRISE, FL 33351.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful  
activities or business permitted under the laws of the United States,  
the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is  
authorized to have outstanding at any one time is 1,500 shares of common  
stock having a par value of \$1.00 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the

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TALLAHASSEE, FLORIDA

corporation shall be 10117 W. OAKLAND PK, #415, SUNRISE, FL 33351,

and the name of the initial registered agent of the corporation at

that address is LISA COLLINS.

#### ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE VI. PREEMPTIVE RIGHTS

Every shareholder upon the sale for cash of any new stock of this corporation of the same kind, class, or series as that which he already holds, shall have the right to purchase his pro rata share thereof at the price which it is offered to others.

#### ARTICLE VII. SPECIAL PROVISION

It is the intent of the incorporator that the corporation will qualify under Section 1244 of the Internal Revenue Code and that the corporation will file a Subchapter S corporation.

#### ARTICLE VIII. OFFICERS AND DIRECTORS

This corporation shall have ONE officer and ONE director, initially. The name and street address of the initial officer and director who shall hold office for the first year of the corporation, or until his successor is elected or appointed are:

LISA COLLINS  
Dir/Pres./Secy/Treasurer  
10117 W OAKLAND PARK BLVD, #415  
SUNRISE, FL 33351

ARTICLE IX. SUBSCRIBERS

The name and street addresses of the subscriber to these Articles

of Incorporation is:

LISA COLLINS  
10117 W OAKLAND PARK BLVD, #415  
SUNRISE, FL 33351

IN WITNESS WHEREOF, the undersigned has hereto set his hand and

seal on this 8 day of Feb, 1999.



FLDL C452-533-67-702-0

STATE OF Florida

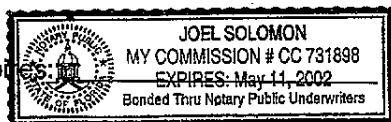
COUNTY OF Browards

The foregoing instrument was acknowledged before me this

8 day of Feb, 1999, by Lisa Collins.

  
Notary Public, State of Florida at Large

My Commission Expires



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE  
FOLLOWING IS SUBMITTED:

FIRST-- THAT CARILLON GROUP USA INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE  
OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF  
SUNRISE.

STATE OF FLORIDA, HAS NAMES LISA COLLINS,

LOCATED AT 10117 W OAKLAND PK BLVD, #415

CITY OF SUNRISE, STATE OF FLORIDA, AS ITS AGENT  
TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

TITLE - PRESIDENT

DATE

*Lisa Collins*  
*2/5/99*

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED  
CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY  
AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS  
REGISTERED AGENT FOR SAID CORPORATION.

SIGNATURE

DATE

*Lisa Collins*  
*2/5/99*

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TALLAHASSEE, FLORIDA