

P99000059413
TRANSMITTAL LETTER

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

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-06/28/99--01031--018
*****78.75 *****78.75

Gentrigs Inc.

SUBJECT:

Gentrigs
(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:

Gentrigs / Mats Thunell
Name (Printed or typed)

4522 Spruce Street Suite 200
Address

Tampa FL 33607
City, State & Zip

813-386 6590 x.392
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUN 28 AM 9:24

FILED

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

TS7/1/99

ARTICLE 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:

Gentriqs, Inc.

ARTICLE II PRINCIPAL OFFICE

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

**4522 Spruce Street
Tampa, Florida 33607**

ARTICLE III SHARES

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

Class	Number of Shares Authorized
Common	100,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

~~CT Corp Systems~~ CT Corporation System
**1200 South Pine Island Road
Plantation, FL 33324**

ARTICLE V INCORPORATOR

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

Mats Thunell
4522 Spruce Street
Tampa, Florida 33607



Signature/Incorporator

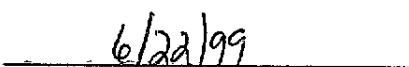


Date

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.



Signature/Registered Agent



Date

James M. Halpin
Assistant Secretary

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TALLAHASSEE, FLORIDA