

P99000103533

TRANSMITTAL LETTER

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

200003053412--5
-11/23/99-01070-001
*****78.75 *****78.75

SUBJECT: DARCON INTERNATIONAL CORP.
(Proposed corporate name - must include suffix)

FILED
99 NOV 23 PM 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: MICHAEL E DARBOUZE
Name (Printed or typed)

20310 N-W 2 STREET
Address

PEMBROKE PINES, FL. 33029
City, State & Zip

954 436-2853
Daytime Telephone number

F. ONY... NOV 3 0 1999

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:
DARCON INTERNATIONAL CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
P.O. Box 823403
SOUTH FL, FL. 33082

ARTICLE III SHARES

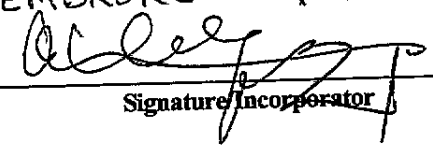
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
MICHAEL E - DARBOUZE
20310 N.W 2 STREET
PEMBROKE PINES, FL. 33029

ARTICLE V INCORPORATOR

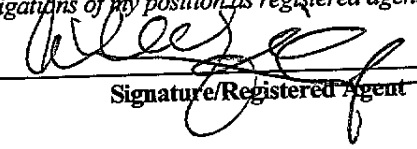
The name and address of the incorporator to these Articles of Incorporation are:
MICHAEL E DARBOUZE
20310 N-W 2 STREET
PEMBROKE PINES, FL. 33029


Signature/Incorporator

11/22/99
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

11/22/99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 NOV 23 PM 12:19

FILED