## TRANSMITTAL LETTER Department of State Division of Corporations TRANSMITTAL LETTER Division of Corporations

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

SUBJECT:		T DESI		RP.	
· · · · · · · · · · · · · · · · · · ·	(PROPOSED CORPORAT		<u>-ude surrix)</u> <b>70000536</b> -04/29/02- *****87.5	01070-	
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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	of	
FROM:	100 BAYY SUNNY ISLE	inted or typed)  (BW DR 3  ddress  ShuFL 3  State & Zip	SECRETARY OF STATE TALLAHASSEE, FLORIDA	FILED  1 02 APR 29 AH 8: 28	

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

Daytime Telephone number

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME  The name of the corporation shall be:
ARTICLE II PRINCIPAL OFFICE
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  100 BAYVIEW DR #512  SUNNY ISLESTRAFT 33160  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:
Any & All Lawful Business
ARTICLE IV SHARES The number of shares of stock is:  — 2000 —
ARTICLE V INITIAL OFFICERS (DIRECTORS (optional) The name(s), address(es) and title(s):
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:
CECILIA PAUL 100 Brysiew DR #512
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:
CETILIA PAUL 100 BAJVIEW DR #512 50PNY ISLES Bet FL 33160 ************************************
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Becilia fdert 4 19 02 Signature/Registered Agent Date
Becilia soletifs Signature/Incorporator  Date 1902