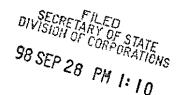
TRANSMITTAL LETTER



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

SUBJECT: M	ARYHAM, INC.			
	(Proposed corporate name - must include suffix)			
			40000265i -09/28/98- ****122.5i	
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate PY REQUIRED	
FROM:	AMANY ADLY AKHI Name (P	NOUKH rinted or typed)	<u> </u>	
	20505 US HWY 19	9 N. Space # 14. Address	8 (E-13)	
-	CLEARWATER, FL City,	33764 State & Zip	·	
-	(813) 926-0310	elenhone number	 	

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:

MARYHAM, INC.

ARTICLE II PRINCIPAL OFFICE

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

CLEARWATER MALL
20505 US HWY 19 N. Space # 148 (E-13)
clearwater, fl 33764

ARTICLE III SHARES

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

400 SHARES NO PAR VALUE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

AMANY ADLY AKHNOUKH
20505 US HWY 19 N. Space # 148 (E-13)
CLEARWATER, FL 33764

ARTICLE V INCORPORATOR

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

AMANY ADLY AKHNOUKH
20505 US HWY 19 N Space # 148 (E-13)
CLEARWATER, FL 33764

Amany Adly Alehna John	
Signature/Incorporator	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

Amony Adly Abhrough	
Signature/Registered Agent	Date