

TRANSMITTAL LETTER

P99000098632

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

700003037987--2  
-11/08/99--01086--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

**SUBJECT:** John M. Benevides & Associates, Incorporated  
(Proposed corporate name - must include suffix)

89 NOV -8 PM 3:00  
FILED  
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:** John M. Benevides  
Name (Printed or typed)

PO Box 14714 North Palm Beach,  
Address

Florida, 33408  
City, State & Zip

(561) 624-4312 or (561) 844-6050  
Daytime Telephone 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.

FILED  
99 NOV -8 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

John M. Benevides & Associates, Incorporated

**ARTICLE II PRINCIPAL OFFICE**

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

513 U.S. Highway One Suite #220, North Palm Beach, Florida 33408

PO Box 14714 North Palm Beach, Florida 33408

**ARTICLE III SHARES**

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

One Thousand at \$1.00 per share

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

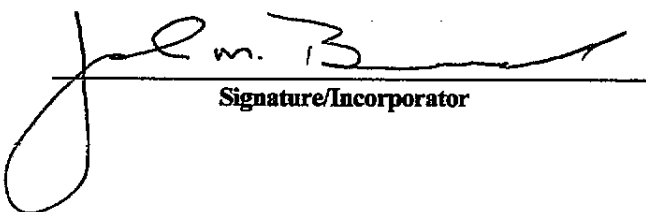
The name and Florida street address of the initial registered agent are:

John M. Benevides 513 US Highway One #220 North Palm Beach, Fl. 33408

**ARTICLE V INCORPORATOR**

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

John M. Benevides 513 US Highway One #220 North Palm Beach, Fl. 33408



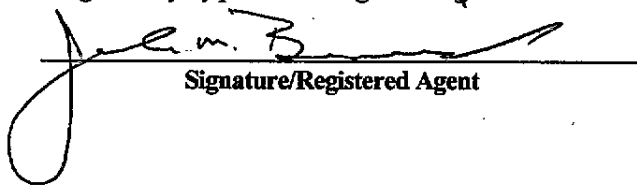
Signature/Incorporator

OCTOBER 29, 1999

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

OCTOBER 29, 1999

Date

99  
90V -8 PH 3:00  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: John M. Benevides & Associates, Incorporated

2. The name and address of the registered agent and office is:

John M. Benevides

(Name)

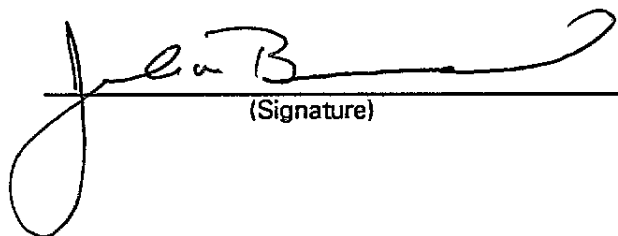
513 US Highway One #220

(P.O. Box not acceptable)

North Palm Beach, Florida 33408

(City/State/Zip)

*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)