

TRANSMITTAL LETTER



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

900006736749--1 -07/29/02--01091--009 ****122.50 *****78.75

SUBJECT:	A PELMIT PLANNERS INC.	
	(Proposed comorate name - must include suffix)	

Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	-
□ \$70.00 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: _	A Permit Name (Pr 6377.3 Rive A Tupiter City, S		TARY OF STASSEE, FLO	FILED
	561- 32 Daytime Te	58 4585	<u> </u>	

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

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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	
ARTICLE I NAME The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE ARTICLE II PRINCIPAL OFFICE To suppose this corporation shall be:	i
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:	
1327. 3 RIVER WAS CRE LANGE	
Jupiter H 33458	
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
100 Sha	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the initial registered agent are: File Number Long	<u>.</u> .
The name and address of the incorporator to these Articles of Incorporation are: Perec Vane 2	
Justee He 33458	
7/rc/sr	
Signature/Incorporator (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 is certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent	th the
Signature/Registered Agent Date	