P000000 28842



TRANSMITTAL LETTER

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

500003170845---1 -03/15/00--01043--007 *****78.75 ******78.75

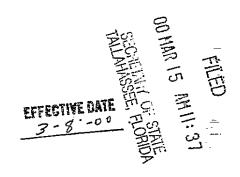
SUBJECT: ZJB, INC

TOC. EXAM

(Proposed corporate name - must include suffix)

Enclosed is an original and (1) one copy of the Articles of Incorporation and a check for \$78.75

FROM:	GELBER AND COMPANY			
	Name	- , , , , , , , ,		
	285 N.W. 199 TH Street, Suite 204			
	Address			
	Miami, FL 33169	-		
	City, State & Zip	: :	<u> </u>	
	(305) 651-8000		F. CLEROSE	MAR 2 1 200
	Daytime Telephone number		-3-	



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 **ZJB**, **INC**.

ARTICLE II PRINCIPAL OFFICE

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

3120 SW MARTIN DOWNS BLVD. PALM CITY, FL 34990-2641

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:

MIKE BLECHMAN 3120 SW MARTIN DOWNS BLVD. PALM CITY, FL 34990-2641

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

MIKE BLECHMAN 3120 SW MARTIN DOWNS BLVD. PALM CITY, FL 34990-2641

ARTICLE VI EFFECTIVE DATE

The effective date of this corporation shall be: MARCH \$, 2000

3 1 2000

Signature/Incorporator

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

Date