POOCOOOS4966

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

SUBJECT:	wien HAITIM be	GAL COUNSEL rate name - must include suff		·		
(Proposed corporate name - must include surfix)						
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Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	check for:	1		
\$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 PY REQUIRED	·		
FROM: ANTOINE RESNÉ JERN TIERRE Name (Printed or typed)						
P. O. Box 2184 Address						
	Minni Bench, City,	<i>Fl</i> 33140 State & Zip		PILED 2000 APR 3 AM 9 59 SECRETARY OF STATE ALL'AHASSEE, FLORIDA		
		,				

Please provide the original and one copy of the articles.

FILED

ARTICLES OF INCORPORATION

2000 APR 73 AM 9:59

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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The name of the corporation shall be:

TWIER HAITIAN LEGAL COUNSEL Incorporated

ARTICLE II PRINCIPAL OFFICE

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

8501 Sw 209 TH LANE MAMI, FI 33189

ARTICLE III SHARES

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

1,000.00 Shaper AT \$1.00 Per VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ANTOINE FRESNEL JEAN PIERRE

8501 Sw 209 TH LANE MIAMI, F1 33189

ARTICLE V INCORPORATOR

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

ANTOINE FRESHEL JEAN FIERRE

8501 Sw 209 TH LANE MIAMI, F1 33189

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

Signature/Registered Agent

Date