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

900003214929--

SUBJECT:

R.M.B.J. INC.

(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

\$78.75

Filing Fee Filing Fee

& Certificate of Status

□ \$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: MYRNA P. BUSTILLO
Name (Printed or typed)

14237 SW 45 STREET

M/Am1, FLorioa 33175

City, State & Zip

(305) 554-6014

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

R.M.B.J. INC.

ARTICLE II PRINCIPAL OFFICE

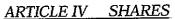
The principal place of business/mailing address is:

14237 SW 45 STREET MIAMI, FZ 33175

ARTICLE III *PURPOSE*

The purpose for which the corporation is organized is:

FOR PROFIT



The number of shares of stock is:

E19Wt (8)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MYRNAPBUSTILLO 14237 SW 45 STREET MIRMI, PL 3317-5

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

MYRNA P. BUSTIllo 14237 SW 45 STREET MIANI, FL 33175

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

<u>-4- 16- 200</u>0 Date

Signature/Incorporator

<u>4- 16 - 2000</u> Date