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TRANSMITTAL LETTER

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

900003277279--1 -06/06/00--01010--012 ******87.50 *****87.50

SUBJECT:	ALTA MODA CORT	INA LTD. ate name - must include suf	ñx)	
Enclosed is an a \$70 Filing I		S of incorporation and a comparison of incorporation and a comparison of the compari	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FF	Simon Bldg. Suite 168A Irving Avenu Port Chester, N.	rinted or typed) e 200F ue	OO JUN 20 AM 7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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

Daytime Telephone number

tel 914 939 2265 ; fax 914 939 7757

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ALTA MODA CORTINA, LTD.

THE SIMON BLDG-SUITE 200F 168 IRVING AVENUE PORT CHESTER, N.Y. 10573 TEL 914 939 2565 - FAX 914 939 7757

Ms. Teresa Brown Corporate Specialist Florida Dept of State Divisions of Corporations 409 E Gaines Stree Tallahassee, Florida 32399

Dear Ms. Brown:

Thank you for your letter of 13 June with respect to using the correct legal corporate suffix for our Florida company.

Enclosed you will find two original filing requests.

In addition to the above please feel free to call me if you have any further questions.

We hope that the enclosed is correct and look forward to our Florida Cerificates of Incorporation.

Kindest regards,

Stephen Schwartz, Secretary

Álta Moda Cortina

19 June 2000



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 13, 2000

STEPHEN SCHWARTZ ALTA MODA CORTINA LTD. 168A IRVING AVENUE, SUITE 200F PORT CHESTER, NY 10573

SUBJECT: ALTA MODA CORTINA LTD.

Ref. Number: W00000014919

We have received your document for ALTA MODA CORTINA LTD. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of the abbreviation "Ltd." does not clearly indicate that this is a corporation instead of a partnership. Therefore, please remove the abbreviation "Ltd." from the corporate name."

The use of LIMITED or LTD. is not acceptable as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Teresa Brown Corporate Specialist

Letter Number: 900A00033629

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:

ALTA MODA CORTINA INC.

ARTICLE II PRINCIPAL OFFICE

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

1525 NW 3RD STREET DEEDFIELD BEACH FLORIDA

ARTICLE III SHARES

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

200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mr. Ronald Katzoff

9800 Grand Verde Way - Suite # 409

Boca Raton, Fla 33428

ARTICLE V INCORPORATOR

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

Stephen Schwartz c/o Alta Moda Cortina Inc.

Simon Bldg Suite 200F 168A Irving Avenue

Port Chester/New Nork. 10573

(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

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