Pooloo 76803 TRANSMITTAL LETTER

DEPARTMENT OF STATE DIVISION OF CORPORATIONS PO BOX 6327 TALLAHASSEE, FL 32314

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SUBJECT: <u>NIBOR GENERAL CONTRACTORS INC</u>
(PROPOSED CORPORATE NAME)

ENCLOSED IS AN ORIGINAL AND ONE(1) COPY OF THE ARTICLES OF INCORPORATION AND OUR CHECK FOR \$ 78.75.

FROM:

RICHARD RIESENBERG
NAME

644 E. HALLANDALE BEACH BLVD.

ADDRESS

HALLANDALE, FL. 33009

CITY, STATE AND ZIP

954-458-5514

AREA CODE AND PHONE NUMBER

ARTICLES OF INCORPORATION <u>O</u>F

NIBOR GENERAL CONTRACTORS, INC.

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE #1 NAME OF THE CORPORATION

NIBOR GENERAL CONTRACTORS, INC.

ARTICLE #2 PRINCIPAL OFFICE

C/O RIESENBERG 644 E HALLANDALE BEACH BLVD, HALLANDALE, FL

ARTICLE #3 SHARES

1000 SHARES COMMON

ARTICLE #4 INITIAL REGISTERED AGENT AND STREET ADDRESS

RICHARD RIESENBERG

644 E HALLANDALE BEACH BLVD

HALLANDALE FL 33009

ARTICLE #5 INCORPORATOR(S)

THE NAME(S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO THESE ARTICLES OF INCORPORATION ARE:

RICHARD RIESENBERG

644 E HALLANDALE BEACH BLVD HALLANDALE FL 33009

THE UNDERSIGNED INCORPORATOR(S) HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS DAY OF

SIGNATURE

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	THE NAME OF THE CORPORATION:
	NIBOR GENERAL CONTRACTORS, INC.
2.	THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:
	RICHARD RIESENBERG 644 E HALLANDALE BEACH BLVD HALLANDALE FL 33009
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	SA P I
THI ANI PRO PER	VING BEEN NAMED AS REGISTERED AGENT AND, TO ACCEPT SERVICE OF OCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN IS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT DAGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE DVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE LIGATIONS OF MY POSITION AS REGISTERED AGENT.
	SIGNATURE Pulled

DATE