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TRANSMITTAL LETTER FILED

00 OCT -6 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

900003416699--2
-10/06/00--01058--009
*****78.75 *****78.75

Dana Weems Inc.

SUBJECT: _____

(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
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Name (Printed or typed)

Dana Weems

Address

411 Majorca Avenue

City, State & Zip

Coral Gables, Florida 33134

Daytime Telephone number

(305) 444-1262

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

PH 10/9/00

FILED

ARTICLES OF INCORPORATION

00 OCT -6 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: **Dana Weems Inc.**

ARTICLE II PRINCIPAL OFFICE

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

411 Majorca Ave., Coral Gables, FL 33134

ARTICLE III SHARES

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

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

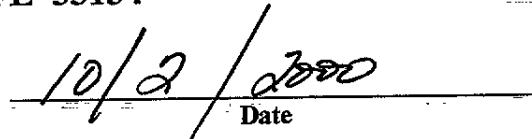
**Dana Weems
411 Majorca Avenue
Coral Gables FL 33134**

ARTICLE V INCORPORATOR

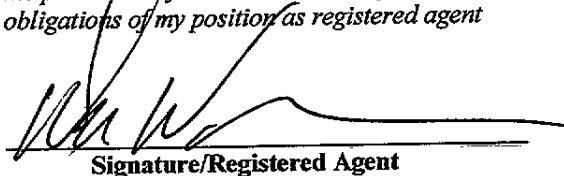
The name and address of the incorporator to these Articles of Incorporation are:

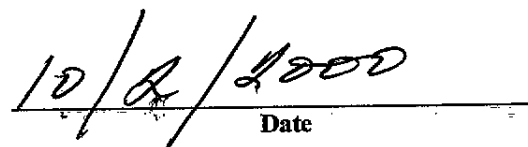
**Dana Weems
411 Majorca Avenue
Coral Gables FL 33134**


Signature/Incorporator


Date

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