TRANSMITTAL LETTER

P00000115310

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

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SUBJECT:

4Closures Unlimited, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| Filing Fee & Certified Copy ADDITIONAL CO | Filing Fee, Certified Copy & Certificate of Status |
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| Printed or (smed) | <u> </u> |
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NOTE: Please provide the original and one copy of the articles.

John States

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:

4Closures Unlimited, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5553 NW 193rd Lane Miami, Florida 33055

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To purchase, sell, rent and/or lease real property for a profit.

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

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:

Osvaldo Piedra 5553 NW 193rd Lane Miami, Florida 33055

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Osvaldo Piedra 5553 NW 193rd Lane Miami, Florida 33055

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 Osvaldo Piedaa

Date

12 7 00

Date

12 7 00

Date

Date