## TRANSMITTAL LETTER Division of Corporations TRANSMITTAL LETTER Operations

P. O. Box 6327
Tallahassee, FL 32314

**700003943457**--9 -04/02/01--01103--010 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: CHAVEZ EMT PROTECT MANAGEMENT GROUP, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the article	es 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
5726 Q	CRETARY OF STATE ORIGINAL Address
(305) 79	76 - 1199 lephone number

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

T.SMITH APR 0.52004

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:
CHAVEZ ENT PROJECT MADAGENEUT GROUP, IDC.
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:
5726 Gereson St. Hollywood Fl 33023
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:
ARTICLE IV SHARES The number of shares of stock is:
DE O
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):
Hector Chausz 5726 Jefferson St. Hollywood Fl. 33023
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:
Hestor Chauez 5726 Gellerson St. Hollywood, Fl 33023
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Heador Chauez 5726 Gesterson St. Hollywood, Ft 33023
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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
Y Heetin Chavey Signature/Registered Agent  O 3/13/01 Date
Signature/Incorporator  O3/13/61  Date