## POLOCOS 41631 TRANSMITTAL LETTER

CX /END -

FILED

01 APR 23 AM 11: 13

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

100004044421--7 -04/23/01--01124--017 \*\*\*\*\*87.50 \*\*\*\*\*\*87.50

SUBJECT:	EMEND INC.				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed is an origina	l and one(1) copy of the article	es of incorporation and a	check for:		
			/		
□ \$70.00	□ \$78.75	□ \$78.75	\$87.50 Filing Fee,		
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Certified Copy		
	& Columbate of Status	& Certained Copy	& Certificate of		
			Status		
		ADDITIONAL CO	PY REQUIRED		
			<u></u>		
FROM: DONAT FORCEST  Name (Printed or typed)					
Name (Printed or typed)					
3540 Miramontee Grile					
3540 Hiramontes Circle					
Wellington FC 33414 City, State & Zip					
	City,	State & Zip	<del></del>		
( ) 000 - 1111					
(S) +12-5141					
Daytime Telephone number					

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

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ARTICLES OF INCORPORATION				
In compliance with Chapter 607 and/or Chapter 621, F	S.S. (Profit)	FILED		
ARTICLE I NAME	_	01 APR 23 AM 11: 13		
The name of the corporation shall be:				
EMEND, INC.	÷	SECRETART OF STATE -TALLAHASSEE, FLORIDA		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	÷			
3540 Miramontes Gride Wellington, FL 35414	_			
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	- 			
Consumer Service	is & Coposale	Services.		
ARTICLE IV SHARES The number of shares of stock is:	4± ·	a.		
10,000,000				
ARTICLE V INITIAL OFFICERS DIRECTO The name(s) and address(es):	RS (optional)			
Casey Forrest 3540 Miramontes Circle Wellington, FC 33414	Ponaf Forres 3540 Miramon Wellington,	tes arcle		
ARTICLE VI REGISTERED AGENT	wexing in,	TC 33414		
The name and Florida street address of the registered	agent is:	-		
Donat Forrest				
3540 Hiramontes Circle Wellington, 1-6 33414 ARTICLE VIT INCORPORATOR	<del></del>			
The name and address of the Incorporator is:	<del></del>	<u>-</u>		
Donaf Forrest				
3540 Miramontes Circle	-			
Wellington FC 33414 **********************************	********	********		
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				
Horne (run		2/01		
Signature/Registered Agent	Date			
Storreet (THAS)	4	20/01		
Signature/Incorporator	Date	, 1		