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FILED
01 JUL 26 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Date July 20, 2001

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

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*****78.75 *****78.75

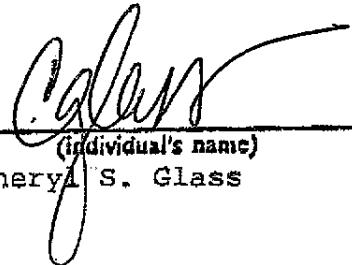
Re: Cheryl Glass Associates, Inc., Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$78.75.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

x 
(individual's name)
Cheryl S. Glass

Cheryl Glass Associates, Inc.
(name of corporation)

MAILING ADDRESS OF CORPORATION		
1400 Longlea Terrace		
Wellington Fl 33414		
561-784-9990		
PHONE		
(561)	236-2218	
Area Code	Number	Ext.

BROWN JUL 27 2001

ARTICLES OF INCORPORATION

of

Cheryl Glass Associates, Inc.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Cheryl Glass Associates, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue five hundred shares (500) of one Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME Cheryl Glass Associates, Inc.
ADDRESS 1400 Longlea Terrace
CITY Wellington STATE FLORIDA ZIP 33414

The name and street address of the initial Registered Agent of this Corporation is:

NAME Cheryl S. Glass
ADDRESS 1400 Longlea Terrace
CITY Wellington STATE FLORIDA ZIP 33414

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME Cheryl S. Glass
ADDRESS 1400 Longlea Terrace
CITY Wellington STATE Florida ZIP 33414

NAME
ADDRESS
CITY STATE ZIP

NAME
ADDRESS
CITY STATE ZIP

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ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Cheryl S. Glass		
ADDRESS	1400 Longlea Terrace		
CITY	Wellington	STATE	Florida
			ZIP 33414
NAME			
ADDRESS			
CITY		STATE	
			ZIP
NAME			
ADDRESS			
CITY		STATE	
			ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 20 day of July, 2001.

[Signature] (Seal)
 _____ (Seal)
 _____ (Seal)

STATE OF FLORIDA)
 COUNTY OF Broward) ss

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Cheryl S. Glass

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that she executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 20 day of July, 2001.

(Notary Seal)

[Signature]
 (Notary Public, State of Florida at Large)

My Commission expires:



Leslie Danisovszky
 My Commission CC903545
 Expires January 19, 2004

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

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Cheryl Glass : Associates Inc
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 1400 Longlea Terrace

Wellington Fl 33414

has named Cheryl S. Glass

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

X 
(registered agent)