(SAMPLE LETTER OF TRANSMITTAL)

	DATE OCTOBER 157 200 101 OCT -3 PM 1:11
Florida Department of State	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1000091319 SEE, FLORID
Re:	WILTO NUESTMENTS, Inc. (Name of Corporation)
	•
Gentlemen:	
Enclosed please find the original and or check in the amount of \$78.75	ne copy of the Articles of Incorporation, together with my
This represents the cost of the Filing Fe Registered Agent Designation for the al	es, Certified Copy of Articles of Incorporation and Fee for bove named corporation.
	Very truly yours. 2000046215222 -10/03/0101039017 *****78.75 ******78.75
	Camela Stockmann CARMELA STOCKMANN
	MILJO INVESTMENTS, INC - (Name of Corporation)
	MAILING ADDRESS OF CORPORATION C/O STOCKMANN 548 N.W. LAMBRUSCO DRIVE
	PORT ST. LUCIE FLORIDA 34986
	PHONE -
	(561) 873-5127

Area Code

Number

ARTICLES OF INCORPORATION

of

	MTITO	INVESTMENTS,	INC.
-	 11/1/10	10 VC3 / 110 1-10;	1100
 	 	(name of corporation)	

548 N.W. LAMBRUSCO DRIVE

PORT ST. LUCIE

ADDRESS

CITY

The undersigned acting as the incorporators of a	corporation under the Florida Busine	ss Corporation Act, adopt(s)
ne following articles of incorporation for such corpora	adon.	
ARTIC	LE I - CORPORATE NAME	
The name of the corporation is:	7 8	
MILJO /NU	restments, luc.	
AR	TICLE II - DURATION	
This corporation shall exist perpetually unless di	ssolved according to Florida law.	
AF	RTICLE III - PURPOSE	
The corporation is organized for the purpose of United States and the State of Florida.	engaging in any activities or business	permitted under the laws of the
The corporation is authorized to issue <u>Soo</u>		e\$ 100 per share.
The street address of the initial principal office	V - INITIAL PRINCIPAL OFFICE and, if different, the mailing address in	s:
STREET ADDRESS C/D STOCKMAN	>	
STREET ADDRESS C/O STOCKMANT	ISCO DRIVE	- <u> </u>
CITY PORT ST. LUCIE	FLORIDA	ZIP 34986
Mailing address, if different		
STREET ADDRESS		
STABLE TO STABLE		
CITY	FLORIDA	ZIP
ARTICLE VI - INITI	AL REGISTERED OFFICE AND	AGENT
The street address of the initial registered of	office and the name of the initial re	egistered agent at the office is
NAME COAMELA STOCKMAN		

FLORIDA

ZIP 34986

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have <u>ONE</u> either increased or diminished from time to time by the addresses of the initial director(s) of the corporation are	By-Laws, but shall never be less than o	<u> </u>
NAME CARMELA STOCKMANN		
ADDRESS 548 N.W. LAMBRUSCO D.	RI <i>VE</i>	
CITY PORT ST. LUCIE	STATE FLORIDA	ZIP 34986
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
ARTICLE The names and addresses of the incorporators signing the	VIII - INCORPORATORS sese Articles of Incorporation are as foll	ows:
NAME CARMELA STOCKMANN		
ADDRESS 548 N.W. LAMBRUSCO	DRIVE	
CITY PORT ST. LUCIE	STATE FLORIDA	ZIP 34986
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed the day of October	•	
		(5'

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



 MiLJO	INVESTMENTS	, INC
 	name of corporation)	· •

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 548 N.W. LAMBRUSCO DRIVE

PORT ST. LUCIE, FLORIDA 34986

has named CARMELA STOCKMANN

located at the aforesaid address, as its registered agent to accept service of process within this

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.

Carnela Stocknam 10/1/01 (Date)

state.