TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 FILED 01 OCT 19 AHII: 17 SECRETARY OF STATE TALLAHASSEE, FLORIES

400004645394--6 -10/19/01--01033--009 *****78.75 ******78.75

SUBJECT:	STEPHAN R.	LUNAY IN	C.
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
□ \$70.00	\$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate o
•		ADDITIONAL CO	Status PPY REQUIRED
FROM:	STEPHAN R	LUNAY	
-		RYLAND AVE Address	NE.
-	ST. PETERS	BURG FL 'State & Zip	33703
	(727) 403-	1112 .R	522 507
, ,	Dayume	Telephone number	
and Sunay	_GAVE		
IZATION BY PHONE TO	II		
0/33/0/			

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. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	FILED 01 OCT 19 AMII: 17
STEPHAN R. LUNAY INC.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
The principal place of business/mailing address is:	
1719 MARYLAND AVE. N.E. ST. PETERSBUR	6, FL. 33703
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	•
legalness	
ARTICLE IV SHARES	
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	•
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
1719 MARYLAND AUE.	
- <i>ろもととたと</i> ろめれんらったと <i>う3う</i> の考	
The name and address of the Incorporator is: STEPHAN R. LUNA	У
1719 MARYLAND AUE.	
57. PETERSBURG FU 33703	*******
Having been named as registered agent to accept service of process for the above stated corporation at the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capac	e place designated in this
APP	
Signature/Registered Agent D	15 200 m

Signature/Incorporator

Out. 15, 2001