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TRANSMITTAL LETTER

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	i \$122.50 \$131.25 Filing Fee Filing Fee. & Certified Copy & Certificate
		Additional Copy Required
	Rah	Bharath
FROM:	Nam Nam	+ (1) (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B
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	\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc	Address
	1. Line	TT 24997
	MENT	City, State & Zip
	10	200 1579
	Dayti	me Telephone number MS. Bharath
		MS. Dhayayh AUTHORIZATION BY PHONE
		CORRECT ANTICLE II
• •		0/2
		DOC EXAM_ (D)

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLEI NAME

The name of the corporation shall be:

5904 S. E. Collins Ave

SLUMI, FTO. 3499T

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

West Bharath

5904 SE. Collins Ave

Stupy, FTG. 34997

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Robert A. Bharath - President 5904 SE. Collins No.
Non G. Bharath - Vice President
Siel Tris. 5904 SE. Collins No.
Showly Fre. 34997

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

day of October 162001.

Robert Follows

Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of	f the corporation is:	Michini & Bo	15, Une
2. The name a	nd address of the reg	istered agent and office is:	OI NO SECRE TALLA
	Robert	Bharath (NAME)	FILE V-5 HASSE
	3840PC	Colling Nic Box or Mail Drop Box NOT ACCEPTABLE)	PM 4: 51 OF STAIL E, FLORIDA
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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.

Robert ABCOCATE 10/24/01
(SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314