POD-OCOCOS876

Department of State Division of Corporati P. O. Box 6327 Tallahassee, FL 323 SUBJECT:			LAHASSEE, FLORIDA	JAN 18 PM 2: 38
Enclosed are an origi	inal and one (1) copy of the artic			
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	₩ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	MOHAMED · A	Printed or typed)		
-	A	Address	100 DS DR.	
-	· ·	State & Zip	2826 300004785	53533
	407 83	3-0312 3	-01/22/02-	-01005018

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

Daytime Telephone number

of 1/25

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME The name of the corporation shall be:	02 JAN 18 PM 2: 18
ROVERCITY. CÓM: INC.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2101 WALDEN WOODS DR-	ORLANDO-FL 3282
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (options) The name(s), address(es) and title(s):	<u>al)</u>
MOHAMED . A. KASSAM.	
12101 WALDEN WOODS DR. OFLANDO FL 32826.	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	- -
CHEALTERS.	4. A C
12101 WROEN WOODS OR. O	RLANDO FL 32826.
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
MOHRMED . A. KASSAM.	
13101 MALDEN MOODI Dr.	
ORUMOO - FZ 32826.	
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and a	stated corporation at the place designated in this agree to act in this capacity
Stoppe Vote	1/16/01
Signature/Registered Agent	Date
of 6 hus	1/16/01
Signature/Incorporator	Date