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TRANSMITTAL LETTER

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SECILE STATE
TALLATINGSHE, FI ORIDA

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

> 700005752917---7 -06/11/02--01029--002

SUBJECT: Obed Luis Estrada Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

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 PPY REQUIRED
FROM:	Obed Luis Estrada Name (Printed or typed)		
	10432 Brook Wood Bluf Rd S Address		
	Jacksonville, Fl 32225 City, State & Zip		
	(904) 534_794	52	

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

Daytime Telephone number

CB612

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

Obed Luis Estrada, Inc

SECILLATASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10432 Brook Wood Bluff Rd S, Jacksonville, Florida, 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

General construction, residencial and comercial and any ot othe transaction or lawful activities permitted under law

ARTICLE IV SHARES

of the USA and Florida state.

The number of shares of stock is:

one hundred (100) shares of common stock at non par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Obed Luis Estrada

10432 Brook Wood Bluff Rd S

Jacksonville, Florida, 32225

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Obed Luis Estrada

10432 Brook Wood Bluff Rd S

Jacksonville, Florida, 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Obed Luis Estrada

10432 Brook Wood Bluff Rd S

Jacksonville, Florida, 32225

Signablire/Registered Agent

May, 24 2002

Date

Signature/Incorporator

May, 24 200**%** Date