TRANSMITTAL LETTER

Department of State

02 AUG -9 PM 12: 35

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

SUBJECT:	(Proposed corpo	orate name - must include suff	Westmen	15.
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	Check for	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:		ADDITIONAL COF	PY REQUIRED	sula la
	1585 W	56 PL		-,
	Hialeah City, Si	P/ 330	12.	
	(305) 986 - 216 Daytime Tele	(305) 556-	\$390	

AUTHORIZATION BY PHONE TO

AUTHORIZATION BY PHONE TO

Please provide the original and one copy of the articles. DOC. EXAM

ARTYCLES OF INCORPORATION

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

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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The name of the corporation shall be:

UNITED FAMILY ENTERPRISES, INC.

PRINCIPAL OFFICE

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

P.O Box - 126718

Hialeah Florida 33012.

ARTICLE III SHARES

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

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Florida

Hialeah

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

1585 W Hialeah

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent