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TRANSMITTAL LETTER

FILED  
02 SEP 27 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

600008069216--7  
-09/27/02--01020--023  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: NJL ENTERPRISES, INC.  
(Proposed corporate name-must include suffix)

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

\$70.00	\$78.75
Filing Fee	Filing Fee & Certificate

FROM: NEIL LEVINE  
Name(Printed or typed)

370 N.W. 111<sup>TH</sup> AVENUE  
Address

CORAL SPRINGS, FL 33071  
City, State & Zip

(954) 263-0513  
Daytime Telephone number

10-1-02  
4

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## **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.

### **ARTICLE I NAME**

The name of the corporation shall be:

NJL ENTERPRISES, INC.

### **ARTICLE II PRINCIPAL OFFICE**

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

370 N.W. 111<sup>TH</sup> AVENUE  
CORAL SPRINGS, FL 33071

### **ARTICLE III SHARES**

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

5000 common shares, par value \$1.00 per share

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

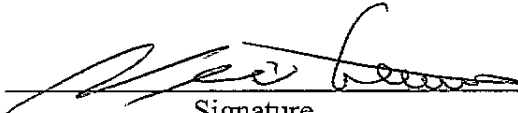
NEIL LEVINE  
370 N.W. 111<sup>TH</sup> AVENUE  
CORAL SPRINGS, FL 33071

**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):

NEIL LEVINE  
370 N.W. 111<sup>TH</sup> AVENUE  
CORAL SPRINGS, FL 33071

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 1<sup>st</sup> day of SEPT, 2002.  
(An additional article must be added if an effective date is requested.)

  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Notarization is not required  
**CERTIFICATE  
OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

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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 the corporation is: NJL ENTERPRISES, INC.

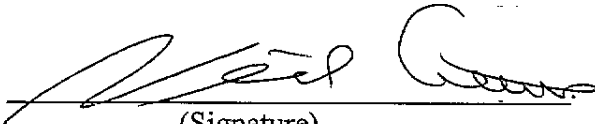
2. The name and address of the registered agent and office is:

NEIL LEVINE  
(Name)

370 N.W. 111<sup>TH</sup> AVENUE  
(P.O. Box or Mail Drop Box NOT Acceptable)

CORAL SPRINGS, FL 33071  
(City/State/Zip)

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)

9/24/02  
(Date)

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