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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT:	JINNPAK CO.					
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM:	Leslie R.L					
	Name (Printed or typed)					
	230 Villa Deste #1510					
Address						
	Delray Beach, FL 33445					
City, State & Zip (561) 702-2581						
						Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Jinnpak Co

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

230 Villa Deste #1510 Delray Beach FL 33445

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation retail sale of backpacks

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Leslic R. Lamothe CEO

O2 NOV 20 PM 44 00
SECRETARY OF STATE
TALLAHATSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Leslic R. Lamottes 230 villa DESK #1510 Delray Beach FL 33445

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Leslic R. Lamotto 230 villa DESK. #1510 Delray Beach FL 33445

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent /Incorporator

11-18-02

Date