

P03000036375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

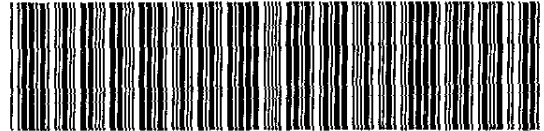
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Handwritten signature]
Office Use Only



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03/24/03--01067--011 **78.75

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03 MAR 20 AM 11:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Rivas & Associates, Inc.
(Proposed corporate name-must include suffix)

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

**COST
\$78.75**

**Filing Fee
& Certificate**

From: Fausto F. Rivas

**4811 N.W. 177 Street
Address**

**Opa Locka, FL 33055
City, State, Zip**

**(305) 815-1735
Daytime Telephone Number**

ARTICLES OF INCORPORATION

The undersigned incorporator (s), for the purpose of forming a corporation under the Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Rivas & Associates, Inc.

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ARTICLE II PRINCIPAL OFFICE

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

4811 N.W. 177 Street
Opa Locka, FL 33055

ARTICLE III SHARES

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

The maximum number of shares that this corporation is authorized to have outstanding at any time is SEVEN THOUSAND FIVE HUNDRED (7,500) of common stock, each share having the par value of ONE DOLLAR (\$1.00).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Fausto F. Rivas
4811 N.W. 177 Street
Opa Locka, FL 33055

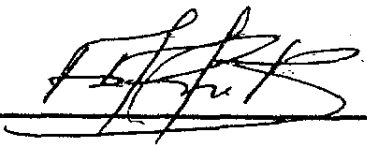
ARTICLE V INCORPORATORS(S)
See instructions for officers/directors

The names(s) and street address of the incorporators is (are):

Fausto F. Rivas
4811 N.W. 177 Street
Opa Locka, FL 33055

The undersigned incorporator(s) has (have) executed these articles of incorporation this

17 day of March, 2003.



Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF 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 corporation is:

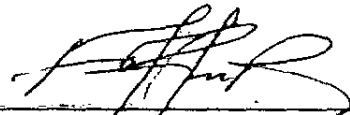
Rivas & Associates, Inc.

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

Fausto F. Rivas
4811 N.W. 177 Street
Opa Locka, FL 33055

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TALLAHASSEE FLORIDA
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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)

03/20/03
(DATE)

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