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TÄLLÄÄÄSSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Suni	nyRain Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	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 PPY REQUIRED
FROM: B	arbara Diane Boyd		
	Name	(Printed or typed)	
	3960 NW 91 st Terrace	All	
	Sunrise, Fl. 33351	Address	
• •	City	, State & Zip	
	(954) 693-1332		
•	Daytime '	Telephone number	

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

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

ARTICLE I NAME

17.4

The name of the corporation shall be: SunnyRain Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3960 NW 91st Terrace, Sunrise Florida, 33351

ARTICLE III

The purpose for which the corporation is organized is: Property acquisition and rental

ARTICLE IV SHARES

The number of shares of stock is: 500

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Barbara Diane Boyd

CEO 3960 NW 91st Terrace Sunrise Florida 33351

ARTICLE VI REGISTERED AGENT

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

Barbara Diane Boyd 3960 NW 91st Terrace Florida, 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara Diane Boyd 3960 NW 91st Terrace Sunrise Florida, 33351

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

10/05/03

Date

10/05/03

Date