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TRANSMITTAL LETTER

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

SUBJECT: _ MIZE	ELL REUNION INCORPORA		-
	(PROPOSED CORPORA	te name <u>– mūst incl</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles 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. C	HERYL MIZELL		
110311 <u> </u>	Name	(Printed or typed)	
	8410 NW 22ND PLACE	Address	
	MIAMI, FL 33147-4112	State & Zip	
	305-801-4772		

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

Daytime Telephone number

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: MIZELL REUNION INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8410 NW 22ND PLACE MIAMI FL 33147

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: FIVE HUNDRED (500)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): CHERYL MIZELL, PRESIDENT 8410 NW 22ND PLACE MIAMI FL 33147

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is: CHERYL MIZELL 8410 NW 22ND PLACE

8410 NW 22ND PL MIAMI FL 33147

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CHERYL MIZELL 8410 NW 22ND PLACE MIAMI FL 33147

**************************************	*************
Having been named as registered agent to accept service of process certificate, I aft familiar with and accept the appointment as registere	for the above stated corporation at the place designated in this d agent and agree to act in this capacity
V Cherif Mixell	11/1/03
Signature/Registered Agent	Date
Send Mixel	V ////03
Signature/Incorporator	Date

TALLAHASSEE, FLURIUA