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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

MESA, KAUFMAN & ROBERTS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	$78.75

FILED
04 MAR -8 AM 9:00
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04 MAR -8 AM 9:00
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TALLAHASSEE, FLORIDA

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:
MESA, KAUFMAN & Roberts, INC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
950 N KROME AVE SUITE 206
HOMESTEAD, FL 33030

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY AND ALL LEGAL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is:
AUTHORIZED 1000, ISSUED AND OUTSTANDING 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s) and address(es):
TOM MESA - PRESIDENT

ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:
TOM MESA - REGISTERED AGENT
4195 S.W. 60th Place
Miami, Florida 33155

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
TOM MESA
4195 S.W. 60th Place
Miami, Florida 33155

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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 this appointment as registered agent and agree to act in this capacity

X _____ 3/4/04
Signature/Registered Agent Date

X _____ 3/4/04
Signature/Incorporator Date