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Division of Corporations

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From:

Account Name : HUBCO

Account Number : 104662003400 Phone (516) 935-3940 : (516)935-3088 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

Lisa R. Helmly, Inc.

Certificate of Status	1
Certified Copy	0
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Comporate Filings

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LISA R HELMLY, INC.

ARTICLE II PRINCIPAL OFFICE

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

LISA R HELMLY, INC.

10361 SW 144 Street Miami, FL 33176

ARTICLE III SHARES

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

1,500 Shares at No Par Value

SECRETA LOS SENTENS DIVISIONS DE CASANTONS DE CASANTONS DE CASANTONS DIVISIONS DIVISIONI DIVISIO

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lisa R Helmly 10361 SW 144 Street Miami, FL 33176

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Lisa R Helmly- President 10361 SW 144 Street Miami, FL 33176

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Lisa R Helmly 10361 SW 144 Street Miami, FL 33176

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29th day of **June** 2004.

Lisa R Helmly - Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: LISAR HELMLY, INC.			
2. The name and address of the recipi	and agent and office in		
2. The name and address of the register	ered agent and dince is:		
	Lisa R Helmly		
	Name		
	10361 SW 144 Street		
	(P.O. Box or Mail Drop Box NOT Acceptable)		
	Miami, FL 33176		
•	(City / State / Zip)		
	•		

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

June 29, 2004

(Date)

SIGNATURE