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TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPOR	E . M.C. TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM:	Ellen J. Piebac Nam	(C)	

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

FILEU

ARTICLES OF INCORPORATION

NAME

ARTIÇLE I

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