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PICK-UP WAIT MAIL				
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TRANSMITTAL LETTER

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

SUBJECT:	M Sunrise,	Inc.			
SUBJECT: RISCUTISC INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
\$70.00 Filing Fee	□ \$78.75	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	19123 NW 2				
	pembrohe pihes, FL 3302-9 City, State & Zip				
954-450-9604 Daytime Telephone number					

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

APPROVED

	AND
ARTICLES OF INCORPORATION	FILED
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	05 FER 18 PM 2: 37
ARTICLE I NAME The name of the corporation shall be: R/Y Sunrise, J	INC. JALI AHASSEE, FLORIDA
ADTICLE II DDINCIDAL OFFICE	W. 23 Street _ Pines, FL 33029
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Seff-em	ploy
ARTICLE IV SHARES The number of shares of stock is: Only	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	to Indoor vice preside
Yara Ladaga - President Rober 19123 NW 33 street 1912	to Lodaga- Vice-president 3 NW 33 Street
pembroke Pines, FL 33029 temb	roke Pines, FC 33029
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:
Yara Ladaga 19123 NW 23 Street Pembroke Pines, FL 23029	registered agent is.
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
yara Ladaga 19123 NW 23 Street	
Pembrone Pines, FL 33029	
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Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	
Chara Godaga	2-11-05 Date
Signature Registered Agent	Date
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