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07/11/05--01023--025 **78.75

DIVISION OF AM 9: 30

TRANSMITTAL LETTER

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

SUBJECT:	Ju-Look Sup						
-	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)				
Enclosed are an ori	iginal and one (1) copy of the a	rticles of incorporation and	l a check for:				
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED				
FROM: _	: LILIANA ALNELO Name (Printed or typed)						
	14890 SW 46 COURT						
	Address M1 RAMAR, FL, 33027 City, State & Zip						
	(305) 962-2395 Daytime Telephone number						

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

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,		1817				/

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

FILED SECRETARY OF STATE DIVISION OF OCCUPATION

05 JUL 12 AM 9: 30

ARTICLE I NAME

The name of the corporation shall be:

Nu-LOOK SUPPLY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

14890 SW 46 COURT MIRAMAR, FL 33027

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

" PROFESSIONAL CORPORATION"

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

LILLIANA ALVELO (PRESIDENT)

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

LILLIANA ALVELO 14890 SW 46 COURT MIRAMAR, FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LILLIANA ALVELO 14890 SW 46 COURT MIRAMAR, FL 33027

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

Signature/Registered Agent Date

Date

Liana Alveb / King ignature/Incorporator