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SLUGLIARY OF STATE ALLAHASSEE, FLORIDA

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CB 8-12

TRANSMITTAL LETTER

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

SUBJECT:	BIEN VENUE (PROPOSED CORPORA)	<u>FACILIT</u>	y BF	
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCLI</u>	DE SUFFIX)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
□ \$70.00 ⁻	□ \$78.75	4 \$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
J	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL COPY REQUIRED		
	7170000711			

40 N W 193 St Address

MIA-MI, FLORIDA 33169

City, State & Zip

Daytime Telephone number

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



August 3, 2005

ELISABETH W. LAFONTANT 40 NW 193 ST MIAMI, FL 33169

SUBJECT: BIENVENUE FACILITY Ref. Number: W05000036736

We have received your document for BIENVENUE FACILITY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 605A00050091

Cynthia Blalock Document Specialist New Filings Section

FILED

ARTICLES OF INCORPORATION

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

05 AUG 11 AM 11:22

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BLENVENUE FACILITY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

40 N.W 1933E MIAMI, FLORIDA B3/69

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

prodit

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ELISABETH WILNA LAFONTANT DIRECTOR

40 N.W 1938+ MIAMI, FL 33/69 JEAN ROBERT LAFONTANT OFFICER

40 N. W 1935+ MIANI, FL 33169

ARTICLE VI REGISTERED AGENT

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

JEAN ROBERT LAFONTANT

40 N.W 1935+

M. AMi, FLORIDA 33169

ARTICLE VII ' INCORPORATOR

The name and address of the Incorporator is:

ELISABETH WILNA LAFONTANT

40, N. W 1935F

MIAMI, FL 33/69

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

Signature/Incorporator