

20 AUG 2005 13:08

A1A CORPORATE SERVICES

USE 52811

P8500017648

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (786)206-9053

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2005 AUG 23 A 9 41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

SOUTHERN TOUCH OF MIAMI, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be
SOUTHERN TOUCH OF MIAMI, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is
11350 SW 155th St.
Miami, FL 33157-1129

ARTICLE III PURPOSE

The purpose for which the corporation is organized :
The corporation may engage in any activity or business permitted
under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:
1,500 COMMON SHARES PAR VALUE \$.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:
DIRECTOR & PRESIDENT:

TERRENCE GOPIE

11350 SW 155th St.

Miami, FL 33157-1129

DIRECTOR & VICE PRESIDENT:

SHEHINAZ GOPIE

11350 SW 155th St.

Miami, FL 33157-1129

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SOUTHERN TOUCH OF MIAMI, INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

TERRENCE GOPIE

11350 SW 155th St.

Miami, FL 33157-1129

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

TERRENCE GOPIE

11350 SW 155th St.

Miami, FL 33157-1129

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.



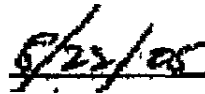
TERRENCE GOPIE / Registered Agent



Date



TERRENCE GOPIE /Incorporator



Date

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