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(Requestor's Name)	
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(Address)	
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(121000)	
(City/State/Zip/Phone #)	
PICK-UP WAIT] MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Stat	us
Special Instructions to Filing Officer:	

Office Use Only

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FILED

TRANSMITTAL LETTER

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

SUBJECT: 57	Tar Island A.	B. Corp.	
	(PROPOSED CORPORA	TIE NAME <u>– MUST INCL</u>	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 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	DPY REQUIRED
FROM:	JUAN C. R	od Rigvez (e (Printed of typed)	(Resident)
	10130 Broa	d Channel	Py
	Miami, FI	33157	
	City	, State & Zip	
	(305) 25/38 Daytime	78/	
	Dayinic	refebriorie finfingi	

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 2, 2005

JUAN C RODRIGUEZ 10130 BROAD CHANNEL DR MIAMI, FL 33157

SUBJECT: STAR ISLAND A.B. CORP.

Ref. Number: W05000041230

We have received your document for STAR ISLAND A.B. CORP. 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 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) 245-6933.

Letter Number: 505A00055232

Dale White Document Specialist New Filings Section

Division of Corporations P.O. ROY 6227 Tallahassaa Florida 22214

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME
ARTICLE 1 NAME The name of the corporation shall be: Star Island A.B. Corp. 1905 SEP 12 A 8: 44
2005 SEP 12 A 8: 44
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 10130 Broad Channel DV
The principal place of hydrogen from the principal place of hydrogen in 10130 Broad Channel Dr
Miani FL 33157
ARTICLE III PURPOSE
The purpose for which the corporation is organized is: What The breeder purposes
ARTICLE IV SHARES 100 5 hares
The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s) address(es) and specific title(s):
Juan C. Rodriguez = Fres - Sec - Trea.
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
10130 Run of Olivers D
Miami F1 33154 (Juan C. Rodriguez)
P///ami F1 33/37 (Juan - 1)
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
Juan C. Rodriguez
10130 Broad Channel Dr Miami F1 33157

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
ATTI-T OF L.
Signature/Registered Agent Rodziguez 8-30-05 Date
Signature/Registered Agent
Juny C. Rodriguez-Pres. Supply 5-30-05 Signature/Incorporator Date Date
Signature/Incorporator Date