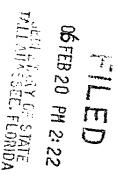


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



n2/n2/06--01016--012 **87.50



COVER LETTER

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

SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u>	ude suffix)			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
FROM: Harro & Robles Name (Printed or typed)						
	1200 NE 48	S T	<u> </u>	*. · » *=		
	Ocala F.L. City,	34479 State & Zip		. ,		
	(352) 438 Daytime To	26928 Elephone number		 12		

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



February 7, 2006

MARIO E ROBLES 1200 NE 42 ST OCALA, FL 34479

SUBJECT: M. ROBLES

Ref. Number: W06000005846

We have received your document for M. ROBLES. However, the document has not been filed and is being returned for the following:

Please complete the ENTIRE form.

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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6934.

Letter Number: 306A00008807

Loria Poole Document Specialist New Filing Section

ARTICLÉS OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be: M. Robles Co	ACLIANA TO
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1200 Ocala	NE 42 CORNER 2: 22
•	Basness
ARTICLE IV SHARES The number of shares of stock is: \O	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR List name(s), address(es) and specific title(s): Mario Erobles 1200 NE 4254 00	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Marie E Robbes 1200 NE 425t	Ocala Fr 3447 q
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Mario E Robles 1200 NE	42 ST ocala f. L.3
**************************************	stated corporation at the place designated in this
Signature/Incorporator	' Date