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SECRETARY OF STATE

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## TRANSMITTAL LETTER

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

SUBJEC		. M. ENTERPRISE C corporate name - r	CORPORATION must include suffix)	
Enclose for:	<b>□ \$70.00</b>	and one (1) copy  \$ \$78.75  Filing Fee  & Certificate	Filing Fee	□ \$131.25 Filing Fee,
	FROM: Na	EDUARDO MUNOZ me (Printed or typ		
	Ad	1635 MAYO STREE	<u>ET</u>	

(786) 859 6270

HOLLYWOOD, FL 33020

City, State & Zip

**Daytime Telephone Number** 

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



March 1, 2006

EDUARDO MUNOZ 1635 MAYO STREE HOLLYWOOD, FL 33020

SUBJECT: E.M. ENTERPRISE CORPORATION

Ref. Number: W06000009605

We have received your document for E.M. ENTERPRISE CORPORATION 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6962.

Letter Number: 206A00013694

Valerie Herring Document Specialist New Filing Section

## ARTICLES OF INCORPORATION 3: 36

SECRETARY OF STATE TAI LAHASSEF FLORIDA

The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607, Florida Statutes, adopt(s) the following Articles of Incorporation:

## ARTICLE I

	Name					
The name of th	e corporation shall be:					
	ORMENO MUNOZ CORPORATION					
	ARTICLE II Principal place of business and mailing address The principal place of business and the mailing address of this corporation shall be:					
	1635 MAYO STREET					
	HOLLYWOOD, FL 33020					
	ARTICLE III Purpose(s) urpose(s) for which the corporation is organized is (are): RATION SHALL ENGAGE IN ANY ACTIVITY OR					
BUSINESS PE	ERMITTED UNDER THE LAWS OF THE UNITED THE STATE OF FLORIDA					
The officers of	ARTICLE IV the corporation shall be:					
President: Secretary: Treasurer:	EDUARDO MUNOZ EDUARDO MUNOZ EDUARDO MUNOZ					

Filing Fee &

CERTIFICATE: \$78.75

### **ARTICLE V**

### **Limitation of Corporate Powers**

The corporate powers of the corporation are as provided in Section 607 Florida Statutes, unless limited as follows:

The Corporation shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Incorporation.

### **ARTICLE VI**

Initial registered agent and street address
The name and the street address of the initial registered agent is:

	EDUARDO MUNOZ	
	1635 MAYO STREET	
	HOLLYWOOD, FL 33020	
The name(s) an	· •	officers/directors corporator(s) for these articles of
	EDUARDO MUNOZ	
	1635 MAYO STREET	
	HOLLYWOOD, FL 33020	
outstanding at a	ARTICLE shares of stock that this corporate any one time is: 1,000 Shares.	· · · · · · · · · · · · · · · · · · ·
this 8th	play of March 2006. Incorporator(s):	
EDV	Typed name of i	ncorporator signing
<u> </u>	Typed name of i	ncorporator signing
	Typed name of i	ncorporator signing

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE TALL AHASSEE TO PHY

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corpo	oration is: Of	RMENO MUNOZ	Z CORPORATION	l
		(must i	nclude suffix)	
2. The name and addres	s of the registered	agent and off	ice is:	
	EDUARDO MUN	OZ		
	(Na	ame)	_	
(Street addı	ess - P.O. Box or I	Mail Drop Box	NOT acceptable	e)
1635	Mayo Street Hollywo (City/St	ood, FI 33020 tate/Zip)	-	
Having been named as re stated corporation at the appointment as registere comply with the provisio	place designated ed agent and agree	in this certific to act in this	ate, I hereby ac capacity. I furti	cept the her agree to
performance of my dutie		r with and acc	ept the obligation	ons of my
position as registered ag	ent.	03/0	08/ <u>0</u> 6	
(Signature)		(D	ate)	