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TRANSMITTAL LETTER

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

SUBJECT:	ART BY JOBI	E CORP	
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u> I	<u>dde Suffix</u>)
Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	i a check for:
☐ \$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
	MIAMI, FL 3.	LANE Address 3133 State & Zip	473-5120
	MIAMI, FL 3. City, 5 HOME 305-447-652 Daytime Te		<u>473-51</u> 20

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

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated 2/28/2007

Eugene S. Steppe Registered Agent