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Office Use Only



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COVER LETTER

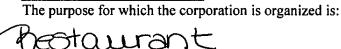
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: PROPOSED CORPORAT	HS TOC	JDE SUFFIX)
□ \$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
160a Alto Miami Reac	Printed or typed) On Poad Address A FL 36 State & Zip	1 <u>Sile</u> 408 3139

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

= -	OF INCORPORATION ith Chapter 607 and/or Chapter 621, F.S. (Prof
The name of the	NAME corporation shall be:

ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1602 A Hon Road, Suute 408



ARTICLE III

ARTICLE IV SHARES

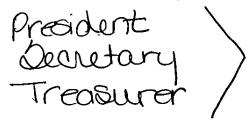
The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PURPOSE



Neal . C. Bocklin 1600 Alton Bood, Suite 408 Miamu Beach, FL 33139

Vice President > hosemany Staltare
1602 Atton hoad, Swite
408
Mlamu Beach, FL
33139

ARTICLE VI REGISTERED AGENT
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:
1600 Atton hood Suite 408
miamu Beach Florida 33139
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
Neal C. Bookling 108
Miami Blach Flouda 33139
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificated am formiliar with and accept the appointment as registered agent and agree to act in this capacity
1/2/08
Signature/Registered Agent Date
Signature/Incorporator Date

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