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(Requestor's Name)				
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(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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COVER LETTER .

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

SUBJECT:	Renesan Enter (PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	cles 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:	Rene M. F	Crandez (Printed or typed)	
· —	9089 Silver G	Address	
	Lake Worth, FL city,	33467 State & Zip	
	561-900-43 Daytime T	342 elephone number	<u> </u>
	Montoya S 34 6 E-mail address: (to be use	Yahoo. Com d for future annual report	notification)

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profi	it)
ARTICLE I NAME The name of the corporation shall be:	•
Renesan Enterprise, Carp	
The principal street address and mailing address, if different is: 9089 Silver Glen Way Lake Worth, Fl 33467 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	FILED 10 FEB 18 PH 3 SECRETARY STEELS AT SECRETARY SECRETARY STEELS AT SECRETARY STEELS AT SECRETARY SECRETARY SECRETARY SECRETARY SECRETARY SEC
Any lawful Business ARTICLE IV SHARES The number of shares of stock is: 100	37
List name(s), address(es) and specific title(s): Rene M. Fernandez (Director) 9089 Silver Glen Way Lake Worth, FI 33467	Sandra Mantoya (Orrector) 1621 Crooked Stickway WPB, F1 33413
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable)	e) of the registered agent is:
Rene M. Fernandez 9089 Bilver Glen Way Lake Wolth, Fl 33467	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Rene M. Fernandez 9089 8ilver Glen Way Lake Worth, Fl 33467	**********
Having been named as registered agent to accept service of proplet place designated in this certificate, I am familiar with and accepted to act in this capacity	-

a /1 /10 Date

Signature/Registered Agent

Signature/Incorporator