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| Certified Copies | Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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TALL AHASSEE FLORIDA

MRD/13

COVER LETTER

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

| SUBJECT: NEGRIL FALLS REALTY CORPORATION (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) | | | | |
|---|--|--|--|--|
| Enclosed are an original and one (1) copy of the articles of incorporation and a check for: | | | | |
| \$70.00 \$78.75 \$87.50 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee, & Certificate of Status ADDITIONAL COPY REQUIRED | | | | |
| FROM LEONARD & MASON - LEMS Accounting Services Name (Printed or typed) | | | | |
| BROOK CYN, NEW YORK 11203. City, State & Zip | | | | |
| City, State & Zip (7/8) 462 - 0058 | | | | |
| Daytime Telephone number MEM 42 AOL. Com E-mail address: (to be used for future annual report notification) | | | | |

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

ARTICLES OF INCORPORATION

11

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ARTICLE II PRINCIPAL OFFICE Principal street address 8225 SIN 1415 SIRET 46 VIVIENTE NILLIAMS 1825 SIN 1415 SIRET 1827 SIN 1415 SIRET 1827 SIN 1415 SIRET 1828 SIN 1415 SI | ARTICLE I NAME The name of the corporation shall be: NEGRIL FALLS | REMITY COR | PORATION | |
|---|--|---|--|--|
| Principal street address State Mailing address: In different is SUS 5 No. 141 5 three Mile Hands Mile H | | V | | |
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| Name: Address: 825 3/ 14/57 578578 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: 825 3/ 14/57 578578 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity. MUCHNE Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$817.155, F.S. MILLIAND MISOPERO | ARTICLE VI REGISTERED AGENT | | ASS OF T | |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Name: V/Carre W/Carre | The name and Florida street address (P.O. Box NOT acceptable) | of the registered agent is: | A PART CO | |
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| this certificate, I am familiar with and accept the appointment as redistered agent and agree to accept this capacity 1 | | | | |
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