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COVER LETTER

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

SUBJECT: Ebenezer3CORP			
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED		
FROM: MARIO A. GONZALEZ Name (Printed or typed)			
4420 NW 33 AVENUE.			
Miami, FL 33142 City, State & Zip			
786-339-4749 Daytime Telephone number			
ebenezer3 coep (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
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)



ARTICLE I	NAME 1 2000	the former way
The name of the	corporation shall be: EbenezeR3CORP	11 DEC 13 PM 12:28
ARTICLE II	PRINCIPAL OFFICE	CENTETTS WE ARE ALLEGED
	Principal <u>street</u> address 4420 NW 3340 AVE <i>nue</i>	Mailing address, Whitelehmis' OF STATE
	Miami, FL 33172	LO IDA
ARTICLE III	DIIDDOSE	
The purpose for	which the corporation is organized is:	
TO PAG	jage in any bwful business a	ctivity
	, , , , , , , , , , , , , , , , , , , ,	1
ARTICLE IV	SHARES	
The number of sh	nares of stock is: 1	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS	A /
Name and		e and Title: MARID A. GONZULZ DEASUR
Address:	4420 NW 32dAUl. Addr	
	Miami, FL, 33 HZ	4.AMI, FL 32142
	- Man 2 A Complete Mandrel	
Name and Address:	Title: MARID A. GONZALEZ Vice-Dresidenth	
Address.	MAMILY BISH 2	
Name and	Title: MARD GONZALEZ SERREHARY Nam	e and Title:
Address:	4420 NW 3310 MUL. Addr	
	MIMM: FL 33142	
ARTICLE VI	REGISTERED AGENT	
The name and F Name:	Iorida street address (P.O. Box NOT acceptable) of the reg	istered agent is:
Address:	4420 NW 33rd Avenue	
	MIMHI PL 83 142	
ARTICLE VII	INCORPORATOR	
	ddress of the Incorporator is;	
Name:	MARIO A. GONZALEZ 4420 NW 33RD AVENUE.	
Address:	MIAMIFL 32142	•
	med as registered agent to accept service of process for th	
inis caruficate, h	am familiar with and accept the appointment as registered	agent and agree to act in this capacity
	i Wassell	12-9-11
- K- Y- S	Required Signature/Registered Agent	Date
Lamburd dit in	V.	an many that the false information and mitted in a
	cument and affirm that the facts stated herein are true. I Department of State constitutes a third degree felony as pro	
	Λ .	
	an Henrall	12-9-11
	Required Signature/Incorporator	Date