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TRANSMITTAL LETTER

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Note: Additional copy of articles is needed only when certified copy is requested.

(305) 554-6124 Telephone Number

KDN 1-18

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

QE

95 JAN 13 AM 9: 22

NYM & ASSOCIATE CORP.

The undersigned incorporator(s), for the purpose of forming a corporation conder the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: NYM Associate Come

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3031 5.W. 109 Count

Hiami, FL. 33165

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

NELSON MARTIN

3031 S.W. 109 COURT

Minui, F. 33165

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

NELSON HARTIN 3031 S.W. 104 Court
Hinni, E. 33165.

MERCEDES MARTIN 303, 5.W. 109 Guet Minni, F. 33165

The undersigned has (have) executed these Articles of Incorporation this

Signature/Title

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutos, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: NYM Associone
2. The name and address of the registered agent and office is:
NELSON MARTIN (NAME)
3031 5 W. 100 Cont
(P.O. BOX NOT ACCEPTABLE)
(P.O. BOX NOT ACCEPTABLE) Minni, Florids 33/65
(CITY/STATE/ZIP)
SIGNATURE (corporate officer)
TITLE Pacsident
DATE 12. 20. 94
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 I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.
SIGNATURE La La
DATE