

(SAMPLE LETTER OF TRANSMITTAL)

P95000048692

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

Re: METAS
(name of corporation)

Inc

SA00001511925
-06-13-95--01064--0005
****122.50 ****122.50

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

CARMEN BORDA
(individual's name)

METAS
(name of corporation)

MAILING ADDRESS OF CORPORATION

P.O. Box 423003		
Kissimmee, FL 34742		
PHONE		
(407)	870-9192	Ex1.
Area Code	Number	

44-11111-122.50
PDR
622.95

95 JUN 21 PM 12:18
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

FILED



FILED

95 JUN 21 PM 12:18

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 19, 1995

CARMEN BORDA
P.O. BOX 423003
KISSIMMEE, FL 34742

407-870-2926

SUBJECT: METAS
Ref. Number: W95000012336

We have received your document for METAS and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The document must include original signatures.

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or

ARTICLES OF INCORPORATION

of

CON METAS INC.
(name of corporation)

FILED

95 JUN 21 PM 12:19

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ARTICLE I - CORPORATE NAME

The name of the corporation is:

CON METAS INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 = shares () of One
Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME:	<u>CON METAS INC.</u>		
ADDRESS:	<u>5408 SILVERSTAR RD.</u>		
CITY:	<u>ORLANDO FL.</u>	<u>32808</u>	FLORIDA
			ZIP

The name and street address of the Initial Registered Agent of this Corporation is:

NAME:	<u>CARMEN BORDA</u>		
ADDRESS:	<u>20-10 F MUSCADINE CT., THE VINEYARDS APTS.</u>		
CITY:	<u>KISSIMMEE, FL</u>	<u>FLORIDA</u>	ZIP <u>34742</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have One (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME:	<u>CARMEN BORDA</u>		
ADDRESS:	<u>P.O. Box 423003</u>		
CITY:	<u>KISSIMMEE, FL</u>	STATE: <u>FL</u>	ZIP <u>34742</u>
NAME:			
ADDRESS:			
CITY:		STATE:	ZIP
NAME:			
ADDRESS:			
CITY:		STATE:	ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	CARMEN BORDA		
ADDRESS	P.O. Box 423003		
CITY	KISSIMEE	STATE	FL. ZIP 34742
NAME	PATRICIA TEALDO		
ADDRESS	810 N. CALVERT ST. #6		
CITY	BALTIMORE	STATE	MD ZIP 21202
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this _____ day of _____, 19____.

*See signature on Registrar agent
acknowledgement.* (Seal)

_____. (Seal)

_____. (Seal)

STATE OF FLORIDA)
COUNTY OF _____) SS

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that _____ executed these Articles of Incorporation

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this _____ day of _____, 19____.

(Notary Seal)

(Notary Public, State of Florida at Large)

My Commission expires:

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

FILED

OF

95 JUN 21 PM 12:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CON METAS INC

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 20-10 F. MUSCADINE CT THE VINEYARDS
KISSIMMEE, FL 34742 APTS.

has named CARMEN BORDA

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

Carmen Borda
(registered agent)

INCORPORATOR