P9500069080 TRANSMITTAL LETTER

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

	Proposed corporate	name - must include su	iffix)	
Enclosed is an origina for :	il and one (1) co	opy of the articles o	f incorporation a	nd a check
\$70.00	\$78.75	\$122.50	\$131.25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate	& Certified Copy	Certified Copy & Certificate	
		Additional Copy	/ Required	
	6			
FROM:	CHEK.	IEL JA	MES	
E US A	Name	(printed or typed)	0 0	
RELECTANIE	2-34841	4 11/193	JERRI	ACE.
AUTHORIZATION BY PHONE	то —	Address		
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DATE 9/1/9 P	//////////////////////////////////////	y, State & Zip	000	
OF EVAM ACIES JOHNELL	19 1	100 1001		
21.67	(305)	<u> </u>		
	Daytime	Telephone number		
115				

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

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August 23, 1995

EZEKIEL JAMES 2984 NORTH WEST 193RD TERRACE MIAMI, FL 33056

SUBJECT: R. E. M. INCORP. Ref. Number: W95000017058

We have received your document for R. E. M. INCORP, and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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 document must state the number of shares of authorized stock.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6972.

Doris Brown Document Specialist

Letter Number: 695A00039491

ARTICLES OF INCORPORATION

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

> ARTICLE I NAME

The name of the corporation shall be:

M. B. J., INC.

ARTICLE II PRINCIPAL OFFICE

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

P.D. BON 695046

Miami, Glorida 33169

ARTICLE III SHARES

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

10

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EZEKIEL JAMES 2984 N.N. 1932 Perrace

Miami, Horida 33056

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

QURICK MULLINGS 18120 NW 18th Ave
MIAMIFL 33086

EZEKIEL JAMES 2984 NW 193TH TERRACE
MIAMI FLURIDA 33086

Matthew BLACK SR- 17940 NW 6 COURT
MIAMI FLURIDA 33169

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

21 th day of August, 1995.

Omial J. Mullings Signature

Signature

Signature

MATTHEW BLACK SX

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, 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.

The name of the corporation is:	REIN INC.	
·		
2. The name and address of the regi	stered agent and office is:	
EZEKIE	(NAME)	
,2984, (P.O.B	OX OF Mail Drop Box NOT ACCEPTABLE)	
Much	CITY/STATE/ZIP)	

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 positionals registered agent.

(SIGNATURE) 21st Hugast 1995