P96000016684 TRANSMITTAL LETTER

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

200001720722 -02/21/96--01076--012 *****78.75

 \$70.00 ing Fee	\$78.75 Filing Fee & Certificate	\$122.50	\$131.25 Filing Fee,	95 FE 3 2
	a Cerpiicato	& Certified Copy Additional Cop	Certified Copy & Certificate y Required	III THE
FROM:	LYONA Name	L DUPRE (printed or typed)	<i>-</i>	SS LORIDA LORIDA
	6325	<u> </u>	ANE	1 61
	MIA	1/ FL. 330 ity, State & Zip	0/5	2/23/96
		25 - 2454 Telephone number	4	TK)

(Proposed corporate name - must include suffix)

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

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:

YOUMA ENTERPRISES TOC

ARTICLE II PRINCIPAL OFFICE

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

6325 NW 201 LANE MIAMI FL 33015

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LYONEL DUPRÉ 6325 NW 201 LANE MIAMI FL. 33015

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):

YOUMA ENTERPRISES
6325 NW 201 LANE
MIAMI FL 33015

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

20TH day of FEBRUARY , 19 96

Signature

N/A

Signature

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.

1. The name of the corporation is:	YOUMA ENTERI	PRISES FOC.
2. The name and address of the reg	gistered agent and office is:	
LYON	EL DUPRÉ.	SS FEB 2
	NW 201 LANE Box or Mail Drop Box NOT ACCEPTABLE)	
MIAMI	FL 33015 (CITY/STATE/ZIP)	LOSIDA LOSIDA 1555

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.

Fleur Da. 02-20-96 (SIGNATURE) (DATE)