## 96000027671

Department of State .. Division of Corporations

## TRANSMITTAL LETTER

\$1.0101.0001.77536324160 -03725796--01078--008 -444470.00 -444470.00 P.O. Box 6327 Tallahassee, FL 32314 (proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$\_\_\_\_\_\_.

FROM: BEACH, FLORION 33406

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

Telephone Number

ARTICLES OF INCORPORATION

OF

HICK MATER UPLE NOT STORTER LAND

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 | NAME

The name of the corporation shall be:

Hower wice, "We'll NO'S

ARTICLE II PRINCIPAL OFFICE

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

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

20

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered age. s:

DR, EDWIN CORDERC 1305. S CONGROSS ALC SUITE 108 BOYNTON BEACH, FORP 1071

## ARTICLE V INCORPORATOR(S)

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

DR. EDWIN OUT DUTE ...
1305 SCENEROSS AVE SUIJE 168
PENNIAN EX MONTE TOP

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

day of MPCI-I, 19 96.

Signature/Title

Signature/Title

## CERTIFICATE OF DESIGNATION 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 indesignating the registered office/registered agent, in the state of Florida.

1.	The name of the corporation is: 1-1000 (1000) Wellings
	cease The
2.	The name and address of the registered agent and office is:
	OR, EDWIN CURNERO (NAME)
	(P.O. BOX NOT ACCEPTABLE)
	(P.O. BOX NOI ACCEPTABLE)
	COTY/STATE/ZIP)
	(CITY/STATE/ZIP)
	SIGNATURE (Corporate officer)  TITLE PRESIDENT  DATE 3/23/96
PI TI Al	AVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF ROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN HIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT ND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE ROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERDRANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.
	SIGNATURE PULL COLL
	· DATE 3/33/96