P9600051676

TRANSMITTAL LETTER

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

SUBJECT:Sph	inx Inc.				
T (F	roposed corporate r	name - must include su	ffix)		
				nii 1 4544 1 154516 96 - 1111103 -004 1.25 - ++++131.25	
Enclosed is an origina	l and one (1) co	py of the articles o	f incorporation a	ind a check	
for : \$70.00 Filing Fee	#78.75 Filing Fee & Certificate	# \$122.50 Filing Fee & Certified Copy Additional Copy	Filing Fee, Cerdiled Copy & Cerdilcate y Required		
FROM:	- Jabo Name	Shahazz		SECO TALL.	
	<u>P.O.</u>	Box 674 Address		FILE 96 JUN 18 1 SECRETARY O ALLAHASSEE,	
	<u>Dani A</u>	FL 3300°	4	AM 9: 23 OF STATE E. FLORIDA	
		929-2457 Telephone number			

NOTE: Please provide the original and <u>one copy</u> of the articles.



June 3, 1996

JABRIL SHABAZZ PO BOX 674 DANIA, FL 33004

SUBJECT: SPHINX, INC. Ref. Number: W96000011673

We have received your document for SPHINX, INC. 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 articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

We are enclosing the proper form(s) with instructions for your convenience.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6919.

Beth Register Corporate Specialist Supervisor

Letter Number: 496A00027718

ARTICLES OF INCORPORATION

FILED 96 JUN 18 Alf 9: 23

SECRETARY OF STATE

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

ARTICLE I

The name of the corporation shall be:

Sphinx Inc

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

Principal office not known. The mailing address is 23 Southeast 13th street #202 DaniA / 33roy

ARTICLE III

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

INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Valeria Cannon 23 Southeast 12 th Street # 202 Dania 12 33004

See instructions for officers/directors

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

Jabr / 1/5 Salar Shabor & (President) 19 Southwest 14th speed # 3 Dearn 12 33004 Valerice Cannon (Trasuer) 23 Southerst 12 " Street Flow Danie 12 33008 THEZ Cannon (Seculary) 129 Northwest 7th Armie #2 Danon FL 33004

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

14 day of June . 19 96 .

(An additional article must be added if an effective date is requested.)

Notarization is not required

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:	
2. The name and address of the registered agent and office is:	
Valeria Cannon (Name)	FILED JUN 18 AH GREEK A CA
23 Saithoust 12 th street # 202 (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	ED A'4 9: 24 STATE STOOD
Dania FL 33004 (CITYSTATE/ZIP)	₹ ₩ ₫
Having been named as registered agent and to accept service of process for corporation at the place designated in this certificate, I hereby accept the appoint agent and agree to act in this capacity. I further agree to comply with the provise relating to the proper and complete performance of my duties, and I am familiar to	tment as registered

Obligations of my position as registered agent.

Oalers Common 14 June 96
(Signature) (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314