00000224 Document N CT CORPORATION SYSTEM Requestor's Name 660 East Jefferson Street Address 32301 Tallahassee, FL 222-1092 Phone State ZlpCity **CORPORATION(S) NAME** Profit Auts () Amendment () Merger) NonProfit Limited Liability Co. () Dissolution/Withdrawal () Mark () Foreign () Annual Report () Other UCC Filing () Limited Partnership () Change of R.A. () Reservation () Reinstatement ()Fic. Name () CUS () Photo Copies () Certified Copy () After 4:30 () Call if Problem () Call When Ready Pick Up Walk In () Mail Out Name PLEASE RETURN EXTRA CORTE Availability FILE STAMPEDO Document 1-6-57 Examiner Updater Veriller Acknowledgment W.P. Verifier nc 1/9/97

W97-247

CR2E031 (1-89)



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Socretary of State

January 6, 1997

CT CORPORATION SYSTEM

TALLAHASSEE.

SUBJECT: R.M.N. INC

Ref. Number: W97000000247

We have received your document for R.M.N. INC and your check(s) totaling \$70.00. 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.

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) 487-6067.

Neysa Culligan Document Specialist

Letter Number: 297A00000451

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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:

N, R, M, INC.

ARTICLE II PRINCIPAL OFFICE

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

224 N. 3RD ST. LANTANA, FL 33462

ARTICLE III SHARES

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

300

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN PORTER 306 E. BOYNTON BEACH BLVD. BOYNTON BEACH FL 33435

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):

RICHARD E. SMITH 306 S. ABERCORN CIR BOYNTON BEACH FL 33436

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
2ND day of JANUARY, 1997
(An additional article must be added if an effective date is requested.)
ME. A.
Signature
Signature
Signature

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 N, R, M, INC.			_
2. The name and address of the registered agent and office is:			
JOHN PORTER	 .	97 Jul	
306 E. BOYNTON BEACH BLVI (P. O. Box or Mail Drop Box NOT ACCEPTABLE)	D.	## -0 -0	FILED
BOYNTON BEACH FL 33435	₹0 :=;	0.1:1	

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 can familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) 1/3/917 (DATE)