P970000 /793/

Requestor's Name

890 S.W. 87 AVENUE, SUITE: 16
Address

MIAMI, FLORIDA 33174 (305)552-5973

City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

300002098349--0 -02/26/97--01051--003 ****122.50 ****122.50 Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

	1. POSC	EN,	AND /	ASSOCIA	TES INTO	- ' CO
	-	(Corpora	tion Name)	(Doc	cument #)	·
	2	(Согрога	tion Name)	(Doc	cument #)	<u> </u>
	3	(Согрога	ition Name)	(Doc	cument #)	<u>i. 7</u>
	4		ition Name)		cumeni #)	
		•	······,	(23.	<i>-</i>	
	Walk in	Ø	Pick up time	2.00	Certified Copy	ion.
	Mail out		Will wait	Photocopy	Certificate of S	Status
	NEW FILINGS		AMEN	DMENTS		
X	Profit		Amendme	ent		
	NonProfit		Resignation	on of R.A., Officer/ Direct	tor	
	Limited Liability		Change of	Registered Agent		2
	Domestication		Dissolutio	on/Withdrawol		ì
	Other		Merger			
renegativa.	Iverant representations		arciosis Reportunitario		- 	
	OTHERFILIN	GS	REG	ISTRATION/		· -
	Annual Report			CIFICATION A		1.1
	Fictitious Name		Foreign		;	
	Name Reservation		Limited Pa	artnership		
			Reinstaten	nent l		

Trademark

Other

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:

ROSEN AND ASSOCIATES INTL CORP

ARTICLE II PRINCIPAL OFFICE

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

8201 NW 66 STREET
MIAMI FLORIDA 33166

ARTICLE III SHARES

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

2000 a \$500.00 PER SHARE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DR. WILLIAM P. ROSEN C.E.O. PRESIDENT
1441 SW 118TH CT
MIAMI FLORIDA 33184

ARTICLE V INCORPORATOR(S)

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

DR. WILLIAM P. ROSEN

1441 SW 118TH CT

MIAMI FLORIDA 33184

ARTICLE VI DIRECTOR(S)

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

DR. WILLIAM P. ROSEN 1441 SW 118TH CT MIAMI FL 33184

C.E.O/PRESIDENT

VICE- PRESIDENT

TREASURER /SECRETARY

The undersigned incorporator(s)	has(have)	executed these	Articles	of Incorp	poration	this
---------------------------------	-----------	----------------	----------	-----------	----------	------

25тн	day ofFEBRUARY, 19 <u>97</u> .
	Mars
	Signature
	Signature
	Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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 co	rporation is:_	ROSEN	AND A	SSOCIAT	ΓES	INTL	CORPOR	OITA.	Ŋ. _· ·
2.	The name and addr	ess of the re	gistered	agent	and office	e is:				
	DR. WILLIA		1441 (ME)	S.W.	118тн	_CI_	MIA	MI Etc 3	3184	-
		(P.O. BOX <u>N</u>			BLE)				<u> </u>	
		MIAMI FLOI (CITY	RIDA 33 //STATE/		<u>-</u> .			A STATE	06	لنسيه • ـ
	AVING BEEN NAMI									
	ROCESS FOR THE A HIS CERTIFICATE. I	_								

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.

DATE 25TH OF FEBRUARY 1997