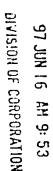
CORPORATE ACCESS, 1116-D Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303 (904) 222-2666 or (800) 969-1666. Fax (904) 222-1666 P.O. Box 37066 (32315-7066) РНОТО СОРУ (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) 200002211442--3 -06/13/97--01049--001 ****157.50 *****78.75 (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) 7.) (CORPORATE NAME & DOCUMENT #) SPECIAL INSTRUCTIONS_

"When you need ACCESS to the world"
CALL THE FILING AND RETRIEVAL AGENCY DEDICATED TO SERVING YOU!



m

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 13, 1997

CORPORATE ACCESS INC. P.O. BOX 37066 TALLAHASSEE, FL 32303

SUBJECT: APARTMENTS RENTALS, INC.

Ref. Number: W97000013938

We have received your document for APARTMENTS RENTALS, INC. and check(s) totaling \$157.50. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

If you have any questions concerning the filling of your document, please call (904) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 197A00031940

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.

> NAME **ARTICLE I**

The name of the corporation shall be:

RENTAL APARTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

20585 N.E. 2nd Avenue Miami, Florida 33179

> ARTICLE III SHARES

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

100 shares, \$1.00 par value

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

Isael Aponte 20585 N.E. 2nd Avenue Miami, FL 33179

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):

Isael Aponte 20585 N.E. 2nd Ave. Miami, FL 33179

The und	lersigned in	corporator(s) has(have)	executed these Articles of Incorporation this
12	_ day of	June	
(An addi	itional articl	e must be added if an	effective date is requested.)
	_	Clack	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.

2. The name and address of the registered agent and office is:					
2. The number and decrease as a second					
Isael Aponte					
(NAME)					
20585 N.E. 2nd Ave.					
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)					
Miami, FL 33179					
(CTTY/STATE/ZIP)					

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.

O. O.a. to	SECRETARIAN SECRET	الل 97	
(SIGINTURE)	(DATE) (DATE)	16 AH 10: 54	