P970000 55700 TRANSMITTAL LETTER

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

2 900002219989--8 -06/23/97--01081--013 *****78.75 *****78.75

SUBJECT: R.	M.A. Consultants, I (Proposed co	rporate name - must include	المناسبة الم	FILED
	nd one(1) copy of the article		check for: 05. 99	0
☐ \$70.00 Filing Fée	■ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Lostor Solorzar Name (P	rinted or typed)		
_	11325 s.w. 161	Ct. Address		
	Miami, FL. 3319	6 State & Zip		
	(305) 385-4963	Felephone number		

7. OHOSSON JUN 2 5 1997

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

R.M.A. Consultants, Inc.



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

1241 S.W. 30 Ct. Miami, FL.

ARTICLE III

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Myrna Perez 1241 S.W. 30 Ct. Miami, FL. 33135

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Lester Solorzano President/ Tresure 11325 S.W. 161 Ct. Miami, FL. 33196

Nelson Perez Vice-Pres./Sec. 1241 S.W. 30 Ct. Miami, FL. 33135

Signature/Indorporator

6/16/97

Date

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

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

Signature/Registered Agent /