(SAMPLE LETTER OF TRANSMITTAL) Horida Department if flate Invision of Corporations O. Box 6327 Callahassee, FL 32314

Re: F. M. V. SERVICES, TWC., Inc.

300002241413---7 -07/18/97--01076--003 ****122.50 ****122.50

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

VICTOR RAGOVIST &

JUL 21 0 . BSB

F. M. V. SECULCES, INC.

MAILING ADDRESS OF CORPORATION
419
3/41 NW 47 TH TESS. A

33319
LAUDSEDALE LAKES, FLA.A

(954) PHONE 739-9809

(954) 739-9809

Area Code Number Ext.

ARTICLES OF INCORPORATION	
of [-]	Ch
ARTICLES OF INCORPORATION of F. M. V. SELVICES, TUC 97 JUL 18 (name of corporation) SECTION	
(name of corporation)	PH 1: 20
(name of corporation) The undersigned acting as the incorporators of a corporation under the Florida Business Corporation for such corporation:	ation:Aggradopt(s) E. FLORIDA
ARTICLE I - CORPORATE NAME	
The name of the corporation is:	
F.M.V. SERVICES, INC.	
ARTICLE II - DURATION	
This corporation shall exist perpetually unless dissolved according to Florida law.	
ARTICLE III - PURPOSE	
The corporation is organized for the purpose of engaging in any activities or business permitted United States and the State of Florida.	under the laws of the
ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue shares of common stock, par value \$ 1.00 ARTICLE V - INITIAL PRINCIPAL OFFICE	per share.
The street address of the initial principal office and, if different, the mailing address is:	
STREET ADDRESS	
3141 NW 47TH TERRACE APT. 419	
CITY LAUDEZBALE LAVES FLORIDA	ZIP 333/9
Mailing address, if different	42
STREET ADDRESS	
	· .
CITY FLORIDA	ZIP
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT	,
·	
The street address of the initial registered office and the name of the initial registered	agent at the office is:
The street address of the initial registered office and the name of the initial registered and t	agent at the office is:
	agent at the office is:

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have <u>ONE</u> either increased or diminished from time to time addresses of the initial director(s) of the corpora	by the By-Laws, but shall never be less than	e number of directors may be one (1). The names and
NAME VICTOR RAGOUL		
	H TERRACE, APT. 41	9
CITY LAUNEZDALE LAKES	STATE FLURIDA	ZIP }3319
NAME	7 (000) 071	
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		100000000000000000000000000000000000000
СІТУ	STATE	ZIP
AR	TICLE VIII - INCORPORATORS	
The names and addresses of the incorporators si		ollows:
NAME VICTOR RAGOU		
ADDRESS 3/4/ NW 47 TH	TERRACE AAT 41	9
CITY LAUDERDALE LAKE	TERRACE, AAT. 41° S STATE PLORIDA	ZIP 333/9
NAME	<u> </u>	
ADDRESS		
CITY	STATE	ZIP
NAME	2.	, ie
ADDRESS		-
CITY	STATE	ZIP
The undersigned incorporator(s) have exec	uted these Articles of Incompration this	14
day of JULY	. 19 97	
	A) was loo	(Signature)
		(Signature)
		(Signature)
en. Postantia		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE FILED 97 JUL 18 PM 1:2

SECRE JARY OF STATE TALLAHÁSSEE, FLORIDA

F.M.	V.	seev/ces	, INC.			
(name of corporation)						

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 3/41 NW 47TH TERRICE APT. 4/9

LAUDEDAGE LAKES, FLA. 333/9

has named VICTOR RAGOUIN

located at the aforesaid address, as its registered agent to accept service of process within this state.

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)

(Date)