TRANSMITTAL LETTER SUBJECT: South Florida Wedding Services and Social Even's Corp. (Proposed corporate name - must include suffix) 900002246469---8 -07/24/97--01054--002 ****131.25 ****131.25

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75

Filing Fee

& Certificate

\$122.50

Filing Fee

& Certified Copy

1 \$131.25

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

Higheah Fl. 33010
City, State & Zip 305) 888-2177

Daytime Telephone number

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.

	4 40
ARTICLE I NAME	
The name of the corporation shall be:	
South Florida Wedding	DetVICTS. and. Docial Events
	Setuces and Social Events
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this	corporation shall be:
587 E 85.t.	
587 E 85t. HIALERIA, Alg. 33010 ARTICLE III SHARES	
<u>ARTICLE III SHARES</u>	
The number of shares of stock that this corporation is autho	rized 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:

Omar On 70/2 Z

587, E. 85+.

ARTICLE V INCORPORATOR

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

Omar Gonzalez 587 E85t Hialenh Fl. 33010

Signature/Incorporator

July 7-97

(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

Date