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

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SUBJECT:	(Proposed con	rporate name - must includ	e suffix)	
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	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	M: Sangu Sangu (Juman Will) Name (Printed or typed) Address Colondo Flocida 30010 City, State & Zip			

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles. 9/3/9>

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.

ART	ICLE I	NAME

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

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

2 mg / Married Notel

ARTICLE III SHARES

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

PARK FAR da 2 25 2

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ARTICLE V INCORPORATOR

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

Songa Engder 8732 Culmen Was Counde, Monda 3220

Signature/Incorporator

(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

Jug 88,97

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