P97000084219

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

SUBJECT: <u>///</u>	ETWORK PROP	PERTIES IN	yC.			
(Proposed corporate name - must include suffix)						
		-	700002307 -09/30/970 ****122.50	9778 1068010 ****122.50		
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	U\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate			
		ADDITIONAL CO	PY REQUIRED ₹	97 97		
FROM: JULIO LEONARDO Name (Printed or typed)						
Called 9-29-97	Name (Printed or typed) 244 N.W. 7TH CT. Address					
,	Address Sim N			12		
BUCA RATON FLORIDA 33486 City, State & Zip						
1	(561) 391-9	7, State & Zip	1: Leonard	lo gave		
Port las	City, State & Zip (561) 391-9337 Daytime Telephone number Outro Leonardo gard add the phone T					
9/16/97	691	- auc.	shares of	5 (

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 3, 1997

JULIO LEONARDO 244 NW 7TH COURT BOCA RATON, FL 33486

SUBJECT: NETWORK PROPERTIES INC.

Ref. Number: W97000020217

We have received your document for NETWORK PROPERTIES INC. and check(s) totaling \$122.50. However, your check(s) and document are being returned for the following:

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

Doris McDuffie Corporate Specialist Supervisor

Letter Number: 997A00043910



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 16, 1997

JULIO LEONARDO 244 NW 7TH COURT BOCA RATON, FL 33486

SUBJECT: NETWORK PROPERTIES INC.

Ref. Number: W97000020217

We have received your document for NETWORK PROPERTIES INC. and check(s) totaling \$122.50. However, your check(s) and document are being returned for the following:

The document must state the number of shares of authorized stock.

Please retain the bylaws for your records.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

Letter Number: 997A00045888

Doris McDuffie Corporate Specialist Supervisor

FILED

ARTICLES OF INCORPORATION

97 SEP 29 AM 8: 12

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

SECRLARRY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I	NAME
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The name of the corporation shall be:

NETWORK PROPERTIES INC.

ARTICLE II PRINCIPAL OFFICE

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

244 N.W. 7TH CT. BULA RATON, FC. 33486

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JULIO LEONAR DU 244 N.W. 7TH CT. BOCA RATON, EL. 33486

ARTICLE V INCORPORATOR

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

JULIU LEUNARDO 244 N.W. 7TH CT. BUCA RATUN, FL. 33486

(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