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

700002376247--2 -12/18/97--01024--005 ******78.75 ******78.75

Enclosed is an origina for : \$70.00 Filing Fee	l and one (1) co \$78.75 Filing Fee & Certificate	py of the articles of incorporation a \$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	nd a check	
FROM:	TOSEPH MESS MLAYESS. Name (printed or typed)			
	11985	U. S. HWY 1 , # 103 Address	97 SEC TALL	÷
	JUNO, FL 33408 City, State & Zip		AHAS	7]
	561-6	26-03-06 Telephone number	29 AM 8:27 URY GF STATE SSEE, FLORID,	
\$			> ✓	

Joseph MLAYESS-ENTERPRISES, INC.

(Proposed corporate name - must include suffix)

NOTE: Please provide the original and one copy of the arti



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 19, 1997

JOSEPH MLAYESS 11985 US HWY 1, #103 JUNO, FL 33408

SUBJECT: JOE MLAYESS ENTERPRISES,

Ref. Number: W97000028268

We have received your document for JOE MLAYESS ENTERPRISES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC), and INCORPORATED.

The name of the entity must be identical throughout the document.

IN ARTICLE I, PLEASE VERIFY WHICH NAME YOU WANT TO USE & DELETE THE OTHER. Joseph MUNICES Extensions, inc.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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) 487-6926.

Tracy Meyer Document Specialist

Letter Number: 397A00059576

(P.S. 9 CORRECT. What yoursk me To do.)

He keyen

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be ENTERPRISES, inc.

ARTICLE II PRINCIPAL OFFICE

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

11985 U.S. HWY 1, #103 JUNO, FL 33408

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $100 \quad \text{SHARE} \leq$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSEPH MUYESS 11985 U.S. HWY 1, # 103 JUNO, FL 33408

FILING FEE: \$70.00

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JOSEPH MLAYESS 11985 U.S. HWY 1, #103 JUNO, FL 33408

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12th day of DECEMBER, 1997

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

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	. The name of the corporation is:	<u> </u>	_
	Joseph - Mlay	Ess ENTERPRISES, in	:•
2.	. The name and address of the registered agent and office	is:	
	JOSEPH MUYESS	971 SECO	

(NAME)

ARE CONTINUED TO STATE OF THE 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.

(DATE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314