TRANSMITTAL LETTER

P98000011761

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

300002397513--6 -01/12/98--01136--013 ****122.50 ****122.50

SUBJECT:		ISES INC. name - must include su	ffix)	
Enclosed is an originator: \$70.00 Filing Fee	st and one (1) co \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	and a check
FROM:	H.A.M ENTERPRISES INC.		F CO	
	Name (printed or typed)			PH RES
		1.26		
		Address		
	SUNRISE, FL 33323			
,	City, State & Zip			
	954-846-0031			•
	Daytime Telephone number			

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 14, 1998

C & J ENTERPRISES INC. 13280 N.W. 11 DRIVE SUNRISE, FL 33323

SUBJECT: C & J ENTERPRISES INC.

Ref. Number: W98000000903

We have received your document for C & J ENTERPRISES INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 487-6929.

Randall Purintun Document Specialist

Letter Number: 398A00002067

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:

H.A.M. ENTERPRISES INC.

ARTICLE II PRINCIPAL OFFICE

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

13280 NW 11 Dr.

Sunrise, Fl. 33323

SECRETARY OF STATE PAYISION OF CORPORATIONS

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Allen P. Shappe 17400 NE 12 Ct. No. Miami Beach, Fl. 33162

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):

Charles Fischer
13280 NW 11 Dr.
Sunrise, F1. 33323

The und	ersigned inco	orporator(s) has(have	executed these Articles	s of Incorporation this
1	_ day of	January	, 19	•
	<u>/</u>	Charles	Tushu Signature	
			Signature	
			Signature	

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:	H.A.M. ENTERPRISES INC.		
2.	The name and address of the registe	ered agent and office is:	1	lα > α τ
	Allen P.	Shappe (Name)	98 FEB -5	ASION OF
	17400 NE (P.O. Box	or Mail Drop Box NOT ACCEPTABLE)	- 3	LED STA
	No. Miam	i Beach, Fl. 33162 (CHY/STATE/ZIP)	1:26	TIONS

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.

Men // 30/97 (DATE)