

(SAMPLE LETTER OF TRANSMITTAL)

P98000011862

DATE

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

200002422042--6
-02/05/98--01023--016
***122.50 ***122.50

Re: TRINETTES Corp, Inc.
(Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Rhianette Viera
(Individual's Name)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 FEB -5 PM 3:11

TRINETTES Corp INC
(Name of Corporation)

MAILING ADDRESS OF CORPORATION		
213 Elderwood Street		
P.O. Box 0537		
Longwood, FL 32752		
PHONE		
(407)	526-1129	
Area Code	Number	Ext.

RP
02-05-98

ARTICLES OF INCORPORATION

of

TRINETTES Corp INC.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

TRINETTES Corp INC

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ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS 213 Elderwood Street

CITY Winter Springs FLORIDA FL ZIP 32708

Mailing address, if different

STREET ADDRESS P.O. Box 0537

Longwood

CITY Longwood FLORIDA FL ZIP 32708

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME Rhianette Viera

ADDRESS , 213 Elderwood

CITY Longwood FLORIDA FL ZIP 32752

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have 3 (~~3~~) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	Rhianette Vieira		
ADDRESS	213 Elderwood St Winter Springs 32708		
CITY	P.O. Box 0537 Longwood	STATE	FL ZIP 32752
NAME	HERMINIA RAMOS		
ADDRESS	505 EVERGREEN		
CITY	Winter Springs	STATE	FL ZIP 32708
NAME	ELVA RIVERA		
ADDRESS	505 EVERGREEN AVE		
CITY	Winter Springs	STATE	FL ZIP 32708

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Rhianette Vieira		
ADDRESS	213 Elderwood St Winter Springs FL 32708		
CITY	P.O. Box 0537 Longwood	STATE	FL ZIP 32752
NAME	HERMINIA RAMOS		
ADDRESS	505 EVERGREEN AVENUE		
CITY	Winter Springs	STATE	FL ZIP 32708
NAME	ELVA RIVERA		
ADDRESS	505 EVERGREEN AVE		
CITY	Winter Springs	STATE	FL ZIP 32708

The undersigned incorporator(s) have executed these Articles of Incorporation this 2 day of February, 19 98.

Rhianette Vieira (Signature)

[Signature] (Signature)

Herminia Ramos (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 FEB -5 PM 3:11

TRINETTES - CORP INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 213 Elderwood Street

P.O. Box 0537 Longwood FL 32752

has named Rhianette Viera

located at the aforesaid address, as its registered agent to accept service of process within this 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.

Rhianette Viera
(Signature)

February 2, 1998
(Date)