P9800012501

NEGRON FAMILY Holdings FAC.

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

SUBJECT:

300002423613--2 -02/06/98--01055--012 ****262.50 ****131,25

-	(Proposed corpor	rate name - must pictude su	dix)	
Enclosed is an original ar	nd one(1) copy of the article	s of incorporation and a	check for :	
\$70.00 Filing Fee	\$78.75 Filing Ree & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	y
		ADDITIONAL CO	PY REQUIRED	
FROM:	WiLLIAM	NEGRON		
	Name (P	rinted or typed)		SE 98
	14130 N.	W. TAV.		
	F	Address	AHASS	9 -6 I
	MIAMI F.	2 33/68		O R D
	Čity,	State & Zip		F 9
	305-	681-4090	DA	5
	Daytime T	elephone number		

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

ne 2/9/98

FILED

ARTICLES OF INCORPORATION

98 FEB -6 AM 9: 40

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

ARTICLE I	NAME:	
The name of the c	corporation shall be:	
	NEGRON FAMILY Holdings INC.	
ADMICT IS IT	DDINGIBAL OFFICE	
	PRINCIPAL OFFICE	
The principal plac	te of business and mailing address of this corporation shall be:	
	14/30 N.W. DAV.	
	Miami FL 33/68	
ARTICLE III	SHARES	
	ares of stock that this corporation is authorized to have outstanding at any one time is:	
	500	
ARTICLE IV	INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Flo	orida street address of the initial registered agent are:	
	WILLIAM WEGRON	
	14130 N.W. 7 AU. Minum FL 33168	
ARTICLE V	INCORPORATOR	
The <u>name and ad</u>	Idress of the incorporator to these Articles of Incorporation are:	
	WilLiam NEGRON	
	14130 N.W. 7AV	
	1 Miam FL 33/68 1	
Ŋ	AMJ 1/28/98	
Signature/Incorporator / Date		
	V	

(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

Date