SE ONLY (Doc OFFICE RUS CORPORATE FILING SERVICE, INC (Rëquestoi s Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Žip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time 200 Certified Copy Mail out | Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILNGS REGISTRATION
QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials CR2E031(9/92)



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

April 8, 1998

LAZARUS

MIAMI, FL

SUBJECT: A & A INC.

Ref. Number: W98000007843

We have received your document for A & A INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 698A00018678

98 APR -9 PM 2:52

OIVISION OF CORPORATION

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:

E+OINC.

98 APR -9 PH 3: 40
SECRETARY OF STATE
TALLAHASSEF, FI ORIGINA

ARTICLE II PRINCIPAL OFFICE

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

9331 S.W. 6 LANE MIAMI, FL 33174

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:

EDUARDO E. FOIRA 9331 S.W. 6 LANE MIAMI, FL 33174

ARTICLE V INCORPORATOR(S)

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

EDUARDO E. FOIRA
9331 S.W. 6 LANE
MIAMI, FL 33174
ARTICLE

. ORLANDO V. FERNANDEZ 1200 W.31 St. #3 HIALEAH, R. 33012

ARTICLE VI DIRECTOR(S)

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

EDUARDO E. FOIRA
9331 S.W. G LANE
MIAMI, FL 33174
PRESIDENT

ORLANDO J. FERNANDEZ 1200 W.31 St. #3 HIPLEAH, PL 3301Z VICE PRESIDENT

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

day of APRIL , 19 98.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: E + O INC.
2.	The name and address of the registered agent and office is:
	EDUARDO E. FOIRA (NAME)
	(NAME)
	9331 SIW. 6 LANE
	(P.O. BOX <u>NOT</u> ACCEPTABLE)
	MIAMI, FL 33174
	(CITY/STATE/ZIP)

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 SEE OF SEE OF

REGISTERED AGENT FILING FEE: \$35.00