755255 TRANSMITTAL LETTER

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

06/18/98--01046--003

SUBJECT: THE KUECHENBERG GROUP

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee Filing Fee & Certificate

\$131.25

Filing Fee

Filing Fee.

& Certified Copy

Certified Copy

& Certificate .

ADDITIONAL COPY REQUIRED

845 NW 110 TERRACE
Address

PLANTATION FL 33322 City, State & Zip

954 370 4611

Daytime Telephone number

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

98 JUN 18 AM 8: 33

ARTICLES OF INCORPORATION

SECRETARY OF STATE

The undersigned incorporator, for the purpose of forming a corporation under the Fibeld HASSEE, FLORIDA

Business Corporation Act, hereby adopts the following Articles of Incompared to the I

The name of the corporation shall be:	
THE KUECHENBERG GROUP, INC	_
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 1859 NOTH PINE ISLAND ROAD #368 PLANTATION, FL 38322	
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
/00	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: DONNAH A KUECHENBERG 845 NW 110 TERRACE PLANTATION, FL 33334	. • • • • • • • • • • • • • • • • • • •
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:	
DONNAH A KUECHENIBERG 845 NW 110 TERRACE PLANTATION FL 33300	7 2 3 1
Daniel Ofwechers 6/15/98 Signature/Incorporator Date	

(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