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P9800067898

Requestor's Name

Address

City State Zip Phone

CORPORATION(S) NAME

M.C. + J's QIF Inc.

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-08/06/98--01001--004
*****78.75 *****78.75

FILED
98 AUG -4 PH 3:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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GR2E031 (1-89)

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:

M. C. & J'S ALF INC.

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ARTICLE II PRINCIPAL OFFICE

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

30515 S.W. 194 AVE.
HOMESTEAD, FL 33030

ARTICLE III SHARES

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

SHARES: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JORGE ENRIQUE MESA
30515 S.W. 194 AVE.
HOMESTEAD, FL 33030

ARTICLE V INCORPORATOR(S)

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

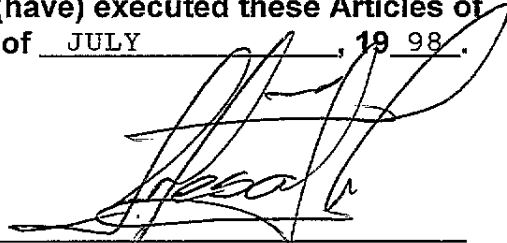
JORGE ENRIQUE MESA
30515 S.W. 194 AVE.
HOMESTEAD. FL 33030

ARTICLE VI DIRECTOR(S)

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

JORGE ENRIQUE MESA (P)
MIRTHA VALDES (VP)
30515 S.W. 194 AVE.
HOMESTEAD. FL 33030

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 22 day of JULY, 19 98.



Signature

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: M. C. & J'S ALF INC.

2. The name and address of the registered agent and office is:

JORGE ENRIQUE MESA
(NAME)

30515 S.W. 194 AVE.

(P.O. BOX NOT ACCEPTABLE)

HOMESTEAD, FL 33030

(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 

DATE 7/22/98

REGISTERED AGENT FILING FEE: \$35.00

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TALLAHASSEE FLORIDA

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