TRANSMITTAL LETTER

P980000 76659

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

200002628592--2 -08/31/98--01063--009 *****78.75 *****78.75

SUBJECT:	MILLENIA CORPORATION			
	(Proposed co	rporate name - must include	suffix)	
Enclosed is an original	and one(1) copy of the article	es of incorporation and a	check for :	٦
S70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
·		ADDITIONAL CO	PY REQUIRED	_
FROM:	ALEJANDRO CASAS Name (Printed or typed)			7ALL 98
	6167 NW 181 TERRACE CIRCLE NORTH Address			AUG 31 CRETARY
	MIAMI, FL 33015 City, State & Zip			AM 8: 5
	305-826-7745 Daytime Telephone number			

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

MILLENIA CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

6167 N.W. 181 TERRACE CIRCLE NORTH MIAMI, FL 33015

ARTICLE III SHARES

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

1000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ALEJANDRO CASAS 6167 NW 181 TERRACE CIRCLE NORTH MIAMI, FL 33015

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ALEJANDRO CASAS 6167 NW 181 TERRACE CIRCLE NORTH MIAMI, FL 33015

Signature/Incorporator

Doto

(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 myposition as registered agent

Signature/Registered Agent

Date