TRANSMITTAL LETTER

P98000080373

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

	Reuven International Inc.	
SUBJECT:	(Proposed corporate name - must include suffix)	

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

- \$70.00 Filing Fee
- \$78.75
 Filing Fee
 & Certificate
- \$122.50
- \$131.25
- ing Fee Filing Fee
 Certificate & Certified Copy
- Filing Fee, Certified Copy
- & Certificate

ADDITIONAL COPY REQUIRED

FROM: <u>Reuven Hirsh</u>

Reuven International, Inc.

3865 Indian Creek DR.

Address

Miami Beach, Fl. 33140
City, State & Zip

305 - 532 - 1655

Daytime Telephone numbe

Suc 11/08

ARTICLES OF INCORPORATION

NAME

ARTICLE I

FILED

98 SEP 11 AM 9: 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

The name of the corporation shall be:
Reuven International, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
3865 Indian Creek DR. Miami Beach, Fl. 33140
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100
t .
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Reuven Hirsh
3865 Indian Creek DR. Miami Beach, Fl. 33140
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
Reuven Hirsh Pres., Secretary, Treasurer
X Plus Hy 9/9/98 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

Date