# TRANSMITTAL LETTER

# 086401

Department of State

P. O. Box 6327 Tallahassee, FI	7	i			
SUBJECT:	SUNI	OINT MARKET IN (Proposed corp	วด 🕏 RESERRCH orate name - must include suf	, INC.	···
Enclosed is an	original a	nd one(1) copy of the articl			7047 <sup>-7</sup> 017 <sup>-2</sup> *****78.75
☐ \$70 Filing I		\$78.75 Filing Fee & Certificate	□\$122,50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		1	ADDITIONAL CO	PY REQUIRED	
FR	.OM: _ <u>^</u>	JOHAMMAD SH	THAR KHOL		

Name (Printed or typed) PINES STE 213 PEMBROKE PINES, FL-33024 City, State & Zip (305) 948-1154 Daytime Telephone number

B. BROCK OCT 8 1998

### 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: SUNPOINT MARKETING	E RE	ssearch,	INC
-		98.0	DIVISION
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:		1	NE SEE
		70	200
10021 PINES_BLVA., STB. 273		3	
PEMBLOKE PINES, FL-33024	•	ů	공 당 당 (

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MOHAMMAD SHAHAB RAUF 10021 PINES BLVD., STE. 213, PEMBROKE PINES, FL- 33024

### ARTICLE V INCORPORATOR

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

MOHAMMAD SHAHAB RAUF 10021 PINES BLVD., STE. 213, PEMBROKE PINES, FL-33024

Signature/Incorporator

9-30-98

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