TRANSMITTAL LETTER

P98000107038

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

000002720390--0 . -12/23/98--01030--009 *****78.75 *****78.75 .

SUBJECT:	Jules Koy	T NC. orporate name - must include	suffix)	ere to a
Enclosed is an origina	l and one(1) copy of the article	EFFECTIVE DATE	- ,	
\$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
EDOM:	Jules Roc	ADDITIONAL CO	PY REQUIRED	
Name (Printed or typed) 5870 Windciff Lane				
	Boca RAto	Address July FL 33 State & Zip	· ω ೄ5	SECONTRA
561 393 7219 Daytime Telephone number			PH 1:45	ָרָן)

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:

Jules Roy INC.

ARTICLE II PRINCIPAL OFFICE

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

windrift Lane 5870 BOCK RATION, FR 33433

ARTICLE III SHARES

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

100

<u>ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

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

Jules 5870 RATUN, FL ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

عادلا windrift Lane 5870 Buca

Signature/Incorporator

Article VI Effective Date

The effective date of this incorporation shall be January 1, 1999.

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

12-14-98