TRANSMITTAL LETTER

79900036035

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

800002844198---C -04/19/99--01129--008 *****87.50 *****87.50

SUBJECT:	<u>L#5</u>	Pal	meras	Inc.	
		4 ,24	(Proposed corpo	rate name - must incl	ude suffix)

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

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

□\$78.75

5/8.75

Filing Fee & Certified Copy \$87.50

Filing Fee,

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: CARDS Reyes Name (Printed or typed)	99,	•
3952 Ftow Pl Address	APR 19 PM 4:	FILED
SARASOTA FIR. 34241 City, State & Zip	: 50	
941-377-6174 Or 941-780-	43	38

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.

<u>ARTICLI</u>		<u>NA</u> 1		
The name of	of the	corporat	ion shall	be:
LAS	PA	1m2	F95	Tw

PRINCIPAL OFFICE

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

4555 Bee Ridge Road SATASOTA FIA.

ARTICLE III

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

100

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

CARlos Reyes

4555 Bee Ridge Road, SATASOTA FIA. 34233

ARTICLE V INCORPORATOR

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

CARlos Reyes, 3952 Eton Place, Sarasota, FC 34241 Lourdes Reyes, 3952 Eton Place, Sarasota, FC 34241

Signature/Incorporator

(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