TRANSMITTAL LETTER

9000048594 Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 AHDA YAHDA'S, INC.
(Proposed corporate name - must include suffix) 7000028763 -05/14/99--01107--003 *****78.75 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : □ \$87.50 □\$78.75 \$78.75 \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED Name (Printed or typed) DONALD HARRISON AVE (PO BOX 1365)
Address CAPE CANAVERAL, FL City, State & Zip 868-1241 Daytime Telephone number WHOON

E. CHESSER MAY 2 8 1999

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: Vahda Vahda 5, INC.

ARTICLE II PRINCIPAL OFFICE

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

1220 North AIA Suite #10 Indialantic, FL 32903

ARTICLE III SHARES

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

1,000,000 (ONE MILLION SHARES)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DONALD L. CRAANEN 531 HARRISON AVE, APT #11 CAPE CANAVERAL, FL 32920

ARTICLE V INCORPORATOR

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

DONALD L. CRAANEN 531 HARRISON AVE, APT #11 CAPE CANAVERAL, FL 32920

Signature/Incorporator

05-23-99

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

05-23-99

Date