TRANSMITTAL LETTER

P990000 55737

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

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SUBJECT:	MANHATTAN	N SOUTH CASTING,	INC.			
	(Proposed corpo	rate name - must include suf	fix)			
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:			
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED			
FROM:	John Peros Name (Pr	inted or typed)	-	-		
	1011 N. Thorton Ave					
	Address Orlando, FL 32803			99 JUN SECKET		
	City, State & Zip		···	ARY OF	The state of the s	
	Daytime Telephone number			1 8x34 FLORIDA		

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:

MANHATTAN SOUTH CASTING, INC.

ARTICLE II _ PRINCIPAL OFFICE

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

1011 N. Thornton Avenue Orlando, FL_32803

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mr. John Peros 1011 N. Thornton Avenue Orlando, FL 32803

ARTICLE V INCORPORATOR

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

Mr. John Peros 1011 N. Thornton Avenue Orlando, FL 32803

Signature/Incorporator

6-19-99

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

Date