99 AUG 30 PH 12: 25 SECRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

800002973688--3 -08/30/99--01099--002 *****78.75 *****78.75

SUBJECT:	MARIA CATAL	AN ENTERPRISES, INC		ž	-
•	(Proposed corpor	ate name - must include suffix)	<u> </u>	y s fg	
Enclosed is a	an original and one (l) copy of the articles of inc	orporation and a cl	neck for:	,
\$70.	00 Filing Fee	X_ \$78.75 Filing Fee	& Certificate		
FROM:	DIANMI	DWARDS			:
	Name (Printed or typed)				1 1 7 7 7
	1842 40TH	TERR SW			
	Ac	dress		· -	1 *
	NAPLES,	FL 34116			-
	Cit	, State & Zip		+ - ′ ·	
	941-455-3	047	-		
	Da	vtime Telephone number		=	in the second

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida BuAct, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MARIA CATALAN ENTERPRISES, INC

ARTICLE II PRINCIPAL OFFICE

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

4613 19TH PLACE SW NAPLES, FL 34116

ARTICLE III SHARES

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

ONE HUNDRED (100 SHARES)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET

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

DIAN M EDWARDS 1842 40TH TERR SW NAPLES, FL 34116

ARTICLE V INCORPORATOR

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

MARIA CATALAN 4613 19TH PLACE SW NAPLES, FL 34116

Signature/Incorporator

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 Lam familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date