## TRANSMITTAL LETTER

## p99000091860

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

200003035122--3 -11/04/99-01061-017 -\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: K.A. P. V. T. P. Exterprise Tisc.  (Proposed corporate name - must include suffix)		
Enclosed is an original and one(1) copy of the article	es of incorporation and a	check for:
\$70.00 \$78.75  Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Violeta I	Paskett rinted or typed)	<b>.</b>
9000 SW	149th Abe	#A304
		<u>2</u>
MIAMI H.	33/93 State & Zip	99 NOV -4 AH SECRETARY OF ALLAHASSEF F

Spoke with Susan white
File corporation name as listed
in RATI.

S. Thompson NOV 0 8 1999

## ARTICLES OF INCORPORATION

ARTICLE I NAME

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

The name of the corporation shall be:	99 TAL
KARIVIP Enterprises, IDC.	99 NOV -1
ARTICLE II PRINCIPAL OFFICE	SEE AM
The principal place of business and mailing address of this corporation shall be:	
8000 SD 149th Aloe # A304 MIAMI, FL. 33193	9: 28 STATE LORIDA
ARTICLE III SHARES	# * · · .
The number of shares of stock that this corporation is authorized to have outstanding at ar	y one time is:
100 SHARES	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRES	<u>ss</u>
The name and Florida street address of the initial registered agent are:	÷.
Violeta I raskett 8000 S.D. 149 Abe # A304	
MIAMI, Fr. 33193	
ARTICLE V INCORPORATOR	· .
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	
Violeta I Paskett	
8000 SL 149 Ave # ABOY MIAMI, FI. 33193	
MIAM, FL 33193	-
xWielta Pashett 10/31/99	
Signature/Incorporator ' \ Date	
(An additional article must be added if an effective date is requested	i.)

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.

obligations of my position as registered agent

Signature/Registered Agent

Date