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M. HODGES

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NOBOX MARKETING GROUP, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARGARITA E. IRIZARRY
(Name of Person)

NOBOX MARKETING GROUP, INC.
(Firm/Company)

2 ALHAMBRA PLAZA, SUITE 700
(Address)

CORAL GABLES, FL 33134
(City/State and Zip code)

For further information concerning this matter, please call:

MARGARITA E. IRIZARRY at (305) 567-0310
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| ☐ \$70.00 Filing Fee | ☒ \$78.75 Filing Fee &
Certificate of Status | ☐ \$78.75 Filing Fee &
Certified Copy | ☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|---|---|

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. NOBOX MARKETING GROUP, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. PUERTO RICO

(State or country under the law of which it is incorporated)

3. 20-2973511

(FEI number, if applicable)

4. DECEMBER 23, 2002

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

(Principal office address)

2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

(Current mailing address)

8. MARKETING, ADVERTISING, GRAPHIC DESIGN, AND ANY OTHER ACTIVITY PERMITTED BY LAW.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: MARGARITA E. IRIZARRY

Office Address: 2 ALHAMBRA PLAZA, SUITE 700

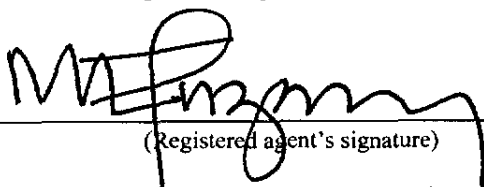
CORAL GABLES, Florida 33134

(City)

(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: CARLOS M. GARCIA

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

Vice Chairman: JAYSON FITTIPALDI

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

Director: MONICA S. HEITLAUF

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

Director: MARGARITA E. IRIZARRY

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

B. OFFICERS

President: CARLOS M. GARCIA

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

Vice President: JAYSON FITTIPALDI

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

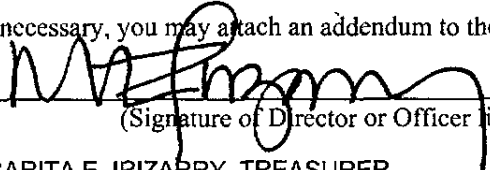
Secretary: MONICA S. HEITLAUF

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

Treasurer: MARGARITA E. IRIZARRY

Address: 2 ALHAMBRA PLAZA, SUITE 700, CORAL GABLES, FL 33134

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. MARGARITA E. IRIZARRY, TREASURER

(Typed or printed name and capacity of person signing application)



**COMMONWEALTH OF PUERTO RICO
DEPARTMENT OF STATE
SAN JUAN PUERTO RICO**

I, **GRICEL FALGAS RODRIGUEZ**, Acting Director, of the Corporate Registry of the Department of State of the Commonwealth of Puerto Rico,

CERTIFY: That according to our records, **NOBOX MARKETING GROUP INC.**, file **132,601**, is a profit corporation organized under the laws of Puerto Rico, on **December 23, 2002 at 2:29 p.m.**

This certification does not imply that this corporation has filed the annual reports, pursuant to the requirement of Article 15.01 of the General Corporation Act. If you need to know if such reports have been filed, you must request a Certificate of Good Standing.

IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by laws, hereby issue this certificate in the City of San Juan, Puerto Rico today **June eighth of the year two-thousand and five.**

A handwritten signature in cursive script, reading "Grisel Falgás Rodríguez".

Grisel Falgás Rodríguez
Acting Director
Corporate Registry

GFR/rsr
2005021902

Estado Libre Asociado da Puerto Rico
Commonwealth of Puerto Rico
CERTIFICADO DE INCORPORACIÓN
CERTIFICATE OF INCORPORATION
Corporación Autorizada a Emitir Acciones De Capital
A Stock Corporation

PRIMERO: El nombre de la corporación es:
FIRST: The name of the corporation is:

NOBOX MARKETING GROUP INC.

SEGUNDO: Su oficina designada en el Estado Libre Asociado de Puerto Rico estará localizada en (dirección postal y física, incluyendo calle, número y municipio):

SECOND: Its designated office in the Commonwealth of Puerto Rico will be located at (mailing and physical address, including street, number and municipality):

2004 Calle McLeary
San Juan, PR 00911

El Agente Residente a cargo de dicha oficina es:
The Resident Agent in charge of said office is:

CARLOS M. GARCÍA PASSALACQUA
2004 Calle McLeary
San Juan, PR 00911

TERCERO: La naturaleza de los negocios o propósitos de la corporación son:

THIRD: The nature of the business or purposes of the corporation are:

SERVICIOS DE MERCADEO, PUBLICIDAD, DISEMINACIÓN DE INFORMACIÓN, DISEÑO GRÁFICO, IMPRENTA, CREACIÓN DE APLICACIONES PARA COMPUTADORAS, DISEÑO DE @WEB-PAGE@ Y SERVICIOS DE INTERNET, Y TODO LO DEMÁS QUE SEA LÍCITO PARA UNA CORPORACIÓN ORGANIZARSE Y DEDICARSE.

CUARTO: El número y clases de acciones que la corporación está autorizada a emitir son:

FOURTH: The number and classes of authorized capital stock of this corporation are:

2,500 ACCIONES COMUNES CLASE A CON UN VALOR PAR DE \$10.00
2,500 ACCIONES COMUNES CLASE B CON UN VALOR PAR DE \$10.00
2,500 ACCIONES COMUNES CLASE C CON UN VALOR PAR DE \$10.00
2,500 ACCIONES COMUNES CLASE D CON UN VALOR PAR DE \$10.00

LA DENOMINACIÓN, FACULTAD, PREFERENCIA Y DERECHO DE LAS ACCIONES SERÁN FIJADAS POR LA JUNTA DE DIRECTORES MEDIANTE RESOLUCIÓN.

QUINTO: El nombre y dirección postal y física (incluyendo calle, numero y municipio) de cada incorporador son:
FIFTH: The name and mailing and physical address (including street, number and municipality) of each incorporator are:

CARLOS M. GARCÍA PASSALACQUA
La Villa Garden Apartments R-713
Guaynabo, PR 00968

JAYSON FITTIPALDI
1956 Calle Cacique
San Juan PR 00911

SEXTO: Si las facultades de los incorporadores habrán de terminar al radicarse el certificado de incorporación, los nombres y las direcciones (incluyendo calle, número y municipio) de las personas que se desempeñarán como directores hasta la primera reunión anual de accionistas o hasta que sus sucesores los reemplacen son:

SIXTH: If the faculties of the incorporators will end upon the filing of the certificate of incorporation, the names and addresses (including street, number and municipality) of the persons who will act as directors until the first annual meeting of the stockholders or until their successors replace them are:

CARLOS M. GARCÍA PASSALACQUA - PRESIDENTE
La Villa Garden Apartments R-713
Guaynabo, PR 00968

JAYSON FITTIPALDI - VICE PRESIDENTE
1956 Calle Cacique
San Juan PR 00911

MONICA S. HEITLAUF CACERES - SECRETARIA
1956 Calle Cacique
San Juan PR 00911

MARGARITA E. IRIZARRY REICHARD - TESORERA
La Villa Garden Apartments R-713
Guaynabo, PR 00968

La corporación tendrá vigencia el 1 de enero de 2003.
The corporation will be effective on January 1, 2003.

Nosotros, los suscribientes, siendo los incorporadores antes señalados, con nuestro propósito de formar una corporación conforme a La Ley General de Corporaciones de Puerto Rico de 1995, juramos que los datos contenidos en este Certificado son ciertos, hoy día 20 del mes de diciembre de 2002.

We, the undersigned, being the incorporators hereinbefore named, for the purpose of forming a corporation pursuant to the Corporation Law of Puerto Rico of 1995, hereby certify that the facts herein stated are true, this 20 day of December, 2002.

CARLOS M. GARCÍA PASSALACQUA

Incorporador
Incorporator

JAYSON FITTIPALDI

Incorporador
Incorporator