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COVER LETTER

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

SUBJECT:	T: Members Business Exchange, Inc. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed is an original an \$70.00 Filing Fee	nd one (1) copy of the Articl \$78.75 Filing Fee & Certificate of Status	s of Incorporation and a □\$78.75 Filing Fce & Certified Copy	check for: \$87.50 Filing Fee, Certified Copy & Certificate		
	ADDITIONAL CO		PY REQUIRED		
FROM:	Peter Vaka Name (Prin	ted or typed)	7 _A		
10424 Beneva Dr. Address			2010 SEP 27 SEURETARY ALLAHASSE	No other No.	
Tampa, FL 33647 City, State & Zip 813-929-3730 Daytime Telephone number			(Tr)		
			AMII: 35 OF JAME OF LORIDA	₹. , \$	
r	prvaka@yahoo.com		")		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Members Business Exchange, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

10424 Beneva Dr.

Tampa, FL 33647

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Members Business Exchange, Inc. was formed to publicly promote high ethical standards in business and to recognize those businesses that exemplify those standards.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Directors are appointed by the President.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Peter Vaka, President, 10424 Beneva Dr., Tampa, FL 33647 Alan Feldman, Director, 498 Lakewood Dr., Brandon, FL 33510 Barbara Vaka, Secretary, 10424 Beneva Dr., Tampa, FL 33647

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Peter Vaka

10424 Beneva Dr.

Tampa, FL 33647

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Peter Vaka

10424 Beneva Dr.

Tampa, FL 33647

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familian with unifaccept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Signature/Incorporato

 $\frac{7/24/2010}{\text{Date}}$