Division of Corporations

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# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Ta:

Division of Corporations

Fax Number : (850) 922-4001

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305) 599-0839

: (305)716-0346 Fax Number

# FLORIDA PROFIT CORPORATION OR P.A.

EGO, INC.

Certificate of Status	0
Certified Copy	1
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#### ARTICLE OF INCORPORATION

<u>of</u>

EGO , INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE J NAME

The name of the corporation shall be: EGO, INC.

The principal place of business of this corporation shall be:
4440 NW. 107 Ave. # 108
Miami, Fl. 33178

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:  $100 \times $10.00 = $1,000.00$ 

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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## ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

Diego Osorio 4440 NW. 107 AVE. # 108 Miami, Florida 33178 Director

## ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

Diego Osorio President, Secretary & Treasurer 4440 NW. 107 AVE. # 108 100 shares Miami, Florida 33178

The undersigned has(have) executed these Article of Incorporation this 15 th. day of February 818 2000.

Signature/Title

Signature/Title

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.	The name of the corporation is:	
2.	The name and address of the registered agent and office is	
	(Name)	
	4440 NW. 107 Ave. # 108	
	(F. O. BOX NOT ACCEPTABLE)	•
	Miami, Florida 33178 (CITY/STATE/ZIP)	
OF AS THE REL	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR R AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES ATING TO THE PROPER AND COMPLETE PERFORMACE OF MY	•
POS	I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY ITION AS MY POSITION AS REGISTERED AGENT.	
	I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY ITION AS MY POSITION AS REGISTERED AGENT.  SIGNATURE  DATE 02/15/00	TILED
	DATE 02/15/90 TO SALE OF	3 5 5