PHANOMITTAL LETTER TRANSMITTAL LETTER

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

| SUBJECT: | MB | A105 | Coep. | |
|----------|----|---------------------|-------|--|
| | | (Proposed corporate | | |

500003172355-----03/16/00--01049--008 ******70 75 ******70 75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee \$78.75 Filing Fee &

Filing Fee & Certificate of

Status

\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: MAYER BENEOUS

Name (Printed or typed)

1202 S.w. 138ct

MIAHI F/ 33184
City, State & Zip

305 - 553 - 4538 Daytime Telephone number

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

632-,2295 1000-7715 1021-2553

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 22, 2000

MAYRA BENCOMO 1202 S.W. 138 COURT MIAMI, FL 33184

SUBJECT: MB AIDS CORP Ref. Number: W00000007715

We have received your document for MB AIDS CORP. However, the document has not been filed and is being returned for the following:

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6973.

Claretha Golden Document Specialist

Letter Number: 700A00015957

ARTICLES OF INCORPORATION

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

| ART | <u>ICLE I</u> | ' | NAI | ME |
|-----|---------------|---|-----|----|
| | | | | |

The name of the corporation shall be:

MB AIDS COEP.

ARTICLE II PRINCIPAL OFFICE

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

5.w 138ct HIA F/ 33184

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DEAL with PTS with Aios, Housing MEDICINE - to SUPPLY MEDICAL NEEDS to HIV/AIDS PTS.

States in the bylaws.

ARTICLE V INITIAL DIRECTORS OFFICERS
The name and addresses: MAYRA BENCOHO - Pres.

1202 SW 138 Ct HIA F/ 33184

ARTICLE VI INITIAL RECISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the registered agent are:

MAY RA BEN CONO-PRES - COD - COD TOSE L BENCOMO-See. SW 138ct MIAMI 7/ 33184

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

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.