# PCCCCCC38191

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



SUBJECT:	First Choice Marke	ting Concepts, Inc		50
(Proposed corporate name - must include suffix)				
Enclosed is an origin	nal and one(1) copy of the article	s of incorporation an	. <b>40000320</b> 2 -04/10/00 *****78.75 d a check for :	23349 01151009 *****78.75
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy  ADDITIONAL (	\$131.25 Filing Fee, Certified Copy & Certificate	
FRO	Rafael M. Padron			
	Name (Printed or typed)			
	166 Hialeah Drive			
Address				
City, State & Zip 305-582-1230				

s. Thompson APR 1 7 2000

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

Daytime Telephone number

No copy

## ARTICLES OF INCORPORATION

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

#### <u>ARTICLE I NAME</u>

The name of the corporation shall be:

First Choice Marketing Concepts, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

166 Hialeah Drive Hialeah, FL 33010

### ARTICLE III \_ SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Rafael M. Padron 166 Hialeah Drive Hialeah, FL 33010

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Rafael M. Padron 166 Hialeah Drive Hialeah, FL 33010

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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 go registered agent

Signature/Registered Agent

Date