

P00000038863

MARCH 20, 2000

SECRETARY OF STATE  
CORPORATE DIVISION  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA 32304

RE: AKMEN.COM, INC.

TO THE SECRETARY OF STATE:

ENCLOSED HERewith ARE THE ARTICLES OF INCORPORATION TOGETHER  
WITH COPY OF SAID ARTICLES FOR AKMEN.COM, INC. AND OUR CHECK IN  
THE AMOUNT OF \$122.50 TO COVER ALL OF NECESSARY FILING FEES  
REQUIRED.

RESPECTFULLY SUBMITTED,

AKMEN.COM, INC.

JUAN LARIOS  
14815 SW 168<sup>TH</sup> TERRACE  
MIAMI, FLORIDA 33187

100003205761--3  
-04/12/00--01060--002  
\*\*\*\*122.50 \*\*\*\*\*78.75

FILED  
00 APR 12 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch APR 18 2000

CERTIFICATE OF INCORPORATION

OF

AKMEN.COM, INC.

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WE, THE UNDERSIGNED, HEREBY ASSOCIATE OURSELVES TOGETHER  
FOR THE PURPOSE OF BECOMING A CORPORATION UNDER THE LAWS OF  
STATE OF FLORIDA, BY AND UNDER THE PROVISIONS OF THE STATUTES  
OF THE SAID STATE OF FLORIDA.

ARTICLE I

THE NAME OF THIS CORPORATION SHALL BE:

AKMEN.COM, INC.

ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS  
PERMITTED UNDER THE LAWS OF THE UNITED STATES AND OF THE  
STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THIS  
CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY TIME IS  
FIVE HUNDRED (500) SHARES OF COMMON STOCK, HAVING A PAR  
VALUE OF ONE (\$1.00) DOLLAR PER SHARE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION WILL  
BEGIN BUSINESS SHALL BE THE SUM OF NOT LESS THAN FIVE HUNDRED  
(\$500.00) DOLLARS.

FILED  
00 APR 12 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE V

THIS CORPORATION SHALL EXIST PERPETUALLY UNLESS SOONER  
DISSOLVED ACCORDING TO LAW.

ARTICLE VI

THE INITIAL STREET OF THE PRINCIPAL OFFICE SHALL BE:

7452 SW 48<sup>TH</sup> STREET  
MIAMI, FLORIDA 33155-4469

ARTICLE VII

THE NUMBER OF DIRECTORS OF THIS CORPORATION SHALL BE  
AT LEAST ONE (1) AND NO MORE THAN FIFTEEN (15).

ARTICLE VIII

THE NAMES AND ADDRESSES OF THE MEMBERS OF THE FIRST  
BOARD OF DIRECTORS ARE AS FOLLOWS:

JUAN LARIOS  
14815 SW 168<sup>TH</sup> TERRACE  
MIAMI, FLORIDA 33187

ARTICLE IX

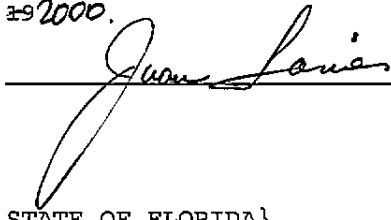
THE NAMES AND STREET ADDRESSES OF THE PERSONS SIGNING  
THESE ARTICLES OF INCORPORATION AS SUBSCRIBED IS AS FOLLOWS:

JUAN LARIOS  
14815 SW 168<sup>TH</sup> TERRACE  
MIAMI, FLORIDA 33187

ARTICLE X

THE CORPORATE EXISTENCE OF THIS CORPORATION SHALL BEGIN  
ON THE DATE THE ARTICLES OF INCORPORATION ARE FILED OF  
RECORD.

IN WITNESS WHEREOF, THE UNDERSIGNED, JUAN LARIOS,  
BEING A NATURAL PERSON, COMPETENT TO CONTRACT, HAVE  
HEREUNTO SET HIS HAND AND SEALS THIS 20 DAY OF MARCH  
192000.

  
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STATE OF FLORIDA}

}SS

COUNTY OF MIAMI - DASE

BEFORE ME, THE UNDERSIGNED NOTARY PUBLIC OF THE STATE OF  
FLORIDA PERSONALLY APPEARED JUAN LARIOS  
TO ME WELL KNOWN AND KNOWN TO ME TO BE THE INDIVIDUAL  
DESCRIBED IN AND WHO EXECUTED THE FOREGOING ARTICLES OF  
INCORPORATION, AND HE ACKNOWLEDGED BEFORE ME THAT HE  
EXECUTED THE SAME FREELY AND VOLUNTARILY FOR THE PURPOSE  
THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL THIS 20 DAY OF MARCH

19 2000

  
\_\_\_\_\_  
NOTARY PUBLIC, STATE OF FLORIDA

MY COMMISSION EXPIRES:



Clare Cullen  
MY COMMISSION # CC835638 EXPIRES  
June 5, 2003  
BONDED THRU TROY FAIR INSURANCE, INC.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE WITHIN THIS STATE,  
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

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IN PURSUANCE OF CHAPTER 48.091, FLORIDA STATUTES, THE  
FOLLOWING IS SUBMITTED, IN COMPLIANCE WITH SAID ACT:  
FIRST: THAT JUAN LARIOS, DESIRING TO  
ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS  
PRINCIPAL OFFICES AS INDICATED IN THE ARTICLES OF  
INCORPORATION, IN THE COUNTY OF DADE, STATE OF FLORIDA,  
HAS NAMED JUAN LARIOS, LOCATED AT 7452 SW 48<sup>TH</sup> STREET,  
MIAMI, FLORIDA, 33155, AS ITS AGENT TO ACCEPT  
SERVICES OF PROCESS WITHIN THIS STATE.

FILED  
00 APR 12 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACKNOWLEDGMENT

HAVING BEEN NAMED TO ACCEPT SERVICES OF PROCESS FOR THE  
ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS  
CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND  
AGREE TO COMPLY WITH THE PROVISIONS OF SAID ACT RELATIVE TO  
KEEPING OPEN SAID OFFICE.

BY: \_\_\_\_\_

RESIDENT AGENT