

# Florida Department of State

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

### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000032038 2)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)922-4001

Erom.

Account Name : CREDIT SOLUTIONS, INC.

Account Number : 110451000522 Phone : (305)827-9080 Fax Number : (305)827-3778

# FLORIDA PROFIT CORPORATION OR P.A.

Golden Eagle Distributors Inc.

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

00 JUN 15 AM 9: 29

SECRETARY OF STATE DIVISION OF CORPORATIONS Audit Number 400000052058 1

# ARTICLES OF INCORPORATION

#### ARTICLE 1-NAME

The name of the Corporation is

GOLDEN EAGLE DISTRIBUTORS INC.

#### ARTICLE 2-PURPOSE OF CORPORATION

The Corporation shall engage in any activity of business permitted under the laws of the United States and of the State of Florida.

### ARTICLE 3-PRINCIPAL OFFICE

The address of the principal office of this Corporation is:

11103 NW 7TH ST APT 203 MIAMI FL 33172-3671

### ARTICLE 4-INCORPORATOR

The name and street address of the incorporator of this Corporation is:

Rafael L. Reyes 11103 NW 7TH ST APT 203 MIAMI FL 33172-3671

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

00 JUN 15 AM 9: 29

Julie 12III, 2001

Audit Number 4000000320382

# Audit Number 4000000320382

## ARTICLE 5- OFFICERS

The officers of the Corporation shall be:

President:

Rafael L. Reyes

11103 NW 7TH ST APT 203

MIAMI FL 33172-3671

Vice President:

Jennifer Rodriguez

11103 NW 7TH ST APT 203

MIAMI FL 33172-3671

## ARTICLE 6-DIRECTOR(S)

The Director(s) of the Corporation shall be:

Rafael L. Reyes

### ARTICLE 7-SHARES

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

100 at \$1.00 per share

# ARTICLE 8-REGISTERED OWNERS

The Corporation, to the extent permitted by law, shall be entitled to treat the person in whose name any share or right is registered on the books if the Corporation as the owner thereto, for all purposes, and except as may be agreed in writing by the Corporation, the Corporation shall not be bound to recognize any equitable or other claim to, or interest in, such share or right on the part of any other person, whether or not the Corporation shall have notice thereof.

## ARTICLE 9-EFFECTIVE DATE

These Articles of Incorporation shall be effective immediately upon approval of the Secretary of State, State of Florida.

Audit Number 400000320 382

23

Audit Number 4000000 520 582

### ARTICLE 10-AMENDMENT

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, or in any amendment hereto, or to add any provision to these Articles of Incorporation or to any amendment hereto, in any manner now or hereafter prescribed or permitted by the provisions of any applicable statute of the State of Florida, and all rights conferred upon shareholders in these Articles of Incorporation or any amendment hereto are granted subject to this reservation.

# 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:

GOLDEN EAGLE DISTRIBUTORS INC.

2. The name and address of the registered agent and office is:

Rafael L. Reyes 11103 NW 7TH ST APT 203 MIAMI FL 33172-3671 0 JUN 15 AM 9: 29

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.

Signature

Date

June 12th, 2000

Audit Number 4000000 320382