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MIAMI, FLORIDA 33134 (305) 444-4994

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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Palma Publishing, Corp.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time _____ ☒ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
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<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
00 NOV 15 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
00 NOV 15 AM 10:25
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

11/15

Examiner's Initials

Date NOVEMBER 14, 2000

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re PALMA PUBLISHING, CORP., Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

(individual's name)

PALMA PUBLISHING, CORP.
(name of corporation)

MAILING ADDRESS OF CORPORATION		
315 SW 27 AVE #315		
MIAMI, FLORIDA 33135		
PHONE		
(305)	642-4976	
Area Code	Phone Number	Ext.

ARTICLES OF INCORPORATION

of

PALMA PUBLISHING, CORP.

(name of corporation)

The undersigned subscriber(s) to these Articles of incorporation, natural person(s) competent to contract hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

PALMA PUBLISHING, CORP.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$ 1.00) par. value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	ADOLFO J. PALMA		
ADDRESS	315 SW 27 AVE #315		
CITY	MIAMI	STATE	FLORIDA ZIP 33135

The principal office, if known, or the mailing address of the corporation is:

NAME	PALMA PUBLISHING, CORP.		
ADDRESS	315 SW 27 AVE #315		
CITY	MIAMI	STATE	FLORIDA ZIP 33135

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	ADOLFO J. PALMA	PRESIDENT
ADDRESS	315 SW 27 AVE #315	
CITY	MIAMI	STATE FLORIDA ZIP 33135
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

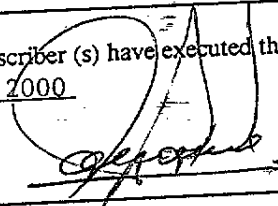
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Article VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	ADOLFO J. PALMA			
ADDRESS	315 SW 27 AVE #315			
CITY	MIAMI	STATE	FLORIDA	ZIP 33135
NAME				
ADDRESS				
CITY		STATE		ZIP
NAME				
ADDRESS				
CITY		STATE		ZIP

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 14 day of NOVEMBER, XX 2000

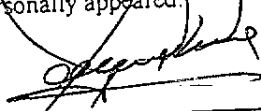

 _____ (Seal)
 _____ (Seal)
 _____ (Seal)

STATE OF FLORIDA

) SS

COUNTY OF MIAMI-DADE

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared: ADOLFO J. PALMA



Signature

FL ID CARD #P450-010-51-465-0

Form of Identification

Signature

Form of Identification

Signature

Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that HE executed these articles of Incorporation, that I relied upon the form _____ of identification of the above named person _____ as indicated opposite each name, and that an oath was not taken.

NOTARY RUBBER STAMP SEAL

Witness my hand and official seal in the County and State last aforesaid this

14 day of NOVEMBER, XX 2000

Notary Signature

**CERTIFICATE OF REGISTERED AGENT
OF**

(name of corporation)

MIAMI, FLORIDA 33135

ADOLFO J. PALMA
has named _____

ACKNOWLEDGEMENT

(registered agent)

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TALLAHASSEE FLORIDA