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Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name

: FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

Phone Fax Number : (305)599-0839

: (305)716-0346



FLORIDA PROFIT CORPORATION OR P.A.

MIAMI BOUNCE INC.

Certificate of Status	0
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Page Count	03
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ARTICLES OF INCORPORATION OF

MIAMI BOUNCE INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

<u>ARTICLE I NAME</u>

The name of the corporation shall be: MIAMI BOUNCE INC.

The principal place of business of this corporation shall be: 3744 sw 133 Pl, Miami Fl 33175.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 shares @ \$1.00 par value.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer (s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Dennisse Benitez 3744 SW 133 Pl Miami Fl, 33175.

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

Dennisse Benitez 3744 SW 133 Pl Miami Fl 33175.

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this,

21st day of November 2000

Signature(s) of incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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.

rporation:	
2. The name and address of the registered agent and office is:	
3744 SW 133 P1 TASECT S	
BOX NOT ACCEPTABLE)	
Miami F1 33175.	
(CITY/STATE/ZIP)	
SIGNATURE DESALSION SUP	
DATE 11-21-00	
ACCEPT SERVICE OF PROCESS FOR THE ON. AT THE PLACE DESIGNATED IN THIS PROPERTY AND INTERPORT OF ALL STATUTES AND COMPLETE PERFORMANCE OF MY DUTIES AND OBLIGATIONS OF SECTION SIGNATURE	