

Division of Corporations

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P01000050884**Florida Department of State**

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : NOEL W. BURNS, P.A.

Account Number : I20010000128

Phone : (305)274-0333

Fax Number : (305)274-0362

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FLORIDA PROFIT CORPORATION OR P.A.**Smart Buyer, Inc.**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

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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.

ARTICLE I- NAME

The name of the corporation shall be:

SMART BUYER, Inc.

ARTICLE II- PRINCIPAL OFFICE

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

P.O. Box 025580
Miami, FL 33102-5580

ARTICLE III- SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 Common Voting shares, with an initial par value of \$.01.

ARTICLE IV-BOARD OF DIRECTORS

The Corporation's initial Board of Directors shall consist of the following two (2) Directors:

Doratheia Ann Dayley
19 Mayfield Dr.
Kingston 10, Jamaica

Alicia Hawes-Randall
165 Poinsettia Close
Monteague P.A., St. Ann, Jamaica

ARTICLE V- INITIAL REGISTERED AGENT AND STREET ADDRESS

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

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Noel W. Burns
7700 N. Kendall Dr.
Suite 503
Miami, FL 33156-1868

ARTICLE VI- INCORPORATOR

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

Noel W. Burns
7700 N. Kendall Dr.
Suite 503
Miami, FL 33156-1868



Signature of Incorporator



Date

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 of Registered Agent



Date

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