

PO 1000052350

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**LAZARUS CORPORATE FILING SERVICE**

(Requestor's Name)  
**3320 S.W. 87 AVENUE**

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**MIAMI, FLORIDA (305)552-5973**  
(City, State, Zip) (Phone #)

**TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)**

500004323315-9  
-05/25/01--01022--021  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. **MESACE USA, CORP.**  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

RECEIVED  
01 MAY 25 AM 10:37  
DIVISION OF CORPORATION

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<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  
01 MAY 25 PM 12:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*[Handwritten signature]*

Examiner's Initials

## ARTICLES OF INCORPORATION

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

### ARTICLE I. NAME

The name of the corporation shall be: **Mesace USA, Corp .**

### ARTICLE II. PRINCIPAL OFFICE

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

**17324 sw 138 Ct  
Miami, FL 33177**

### ARTICLE III. SHARES

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

**830,000 Shares of \$1.00**

### ARTICLE IV. INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Juan F. Arjona Harry  
17324 SW 138 Ct  
Miami, Fl. 33177**

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TALLAHASSEE, FLORIDA

ARTICLE V. INCORPORATOR(S)

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

**Juan F. Arjona Harry** (P)  
**17324 SW 138 Ct**  
**Miami, Fl. 33177**

ARTICLE VI. DIRECTOR(S)

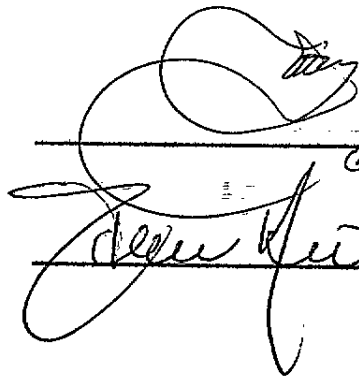
The name(s) and street address(es) of the director(s) to these Article of Incorporation is(are):

On Behalf of: **MESACE S.A.**  
**Juan F. Arjona Harry** (P)  
**17324 SW 138 Ct**  
**Miami, Fl. 33177**

**(2) Diana Aristizabal C.**  
**Secretary**

**17324 SW 138 Ct**  
**Miami, Fl. 33177**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
24. day of May, 2001

  
cc 7/18/46/39 Mod.

**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: **Mesace USA, Corp.**
2. The name and address of the registered agent and office is:

**Juan F. Arjona Harry**

\_\_\_\_\_  
(NAME)

**17324 sw 138 Ct**

\_\_\_\_\_  
(P.O BOX NOT ACCEPTABLE)

**Miami, Fl 33177**

\_\_\_\_\_  
(CITY/STATE/ZIP)

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 A 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 A REGISTERED AGENT.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

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01 MAY 25 PM 12:41  
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