TRANSMITTAL LETTER

02000083240

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

400006811774--2 -07/31/02--01029--008 *****87.50 *****87.50

	(Proposed	l corporate name - must include	e suffix)
osed is an original a	nd one(1) copy of the artic	cles of incorporation and a	check for :
\$70.00	\$78.75	□\$122.59	\$ 87.50 10/98
	• •	1	Filing For
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate	& Certified Copy	Certified Copy
			& Certificate

ADDITIONAL COPY REQUIRED

		1
FROM: _	Name (Printed or typed)	ZOOZ JUL SECNAL TALLAHA
_	P.O. Box 720662 Address	31 M 31 M SSEE FL
-	Migni, FL. 33172 - 0012 City, State & Zip	9: 17 STATE LORIDA
	(305) 2-05-5364 Daytime Telephone number	

NOTE: Please provide the original and one copy of the articles.

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:

GRAFIX SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

909 BUTTONWOOD AVE

MAILING ADDRESS:

NORTH LAUDERDAGE, FL. 33068

P.O. BOX 720662 MIAMI, FL. 33172 - 0012

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 SHARES

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ANYUL M. ESCAMILLA 1667 N.E. MIAMI GARDENS DRIVE # 142

MIAMI, FL 33179

INCORPORATOR

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

ANYUL M. ESCANILLA

ANDRES F. DROZEO

1667 N.E. MIAMI CANDENS DRIVE # 142

909 BUTTONWOOD AVE

MIAMI, FL 33179

NORTH LANDERDALE, FL 33068

Oreignal 1/28/02

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent