

P 02000088018

TRANSMITTAL LETTER

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

SUBJECT: FENIX DISTRIBUTORS INC.  
(Proposed corporate name - must include suffix0)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

( ) \$70.00	( X ) \$78.75	( ) \$122.50	( ) \$131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee Certified Copy & Certificate

FROM: Zulimar Figueira  
Name (Printed or typed)

1470 NW 107 Ave Suite P  
Address

MIAMI, FLORIDA 33172  
city, state & Zip

(305) 718-4243  
Daytime Telephone number

500007045235-9  
-08/12/02-01025-010  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Bm 8/14 3

## **ARTICLES OF INCORPORATION**

In compliance with chapter 607 and /or Chapter 621 F.S. (Profit)

### **ARTICLE I NAME**

The name of the corporation shall be:

**Fenix Distributors Inc.**

### **ARTICLE II PRINCIPAL OFFICE**

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

**1470 NW 107Ave Suite P  
MIAMI, FL 33172**

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**SALES & DISTRIBUTION OF GIFTS PRODUCTS**

### **ARTICLE IV SHARES**

The number of shares of stock is:

THE CORPORATION IS AUTHORIZED TO ISSUE AND HAVE OUTSTANDING AT ANY ONE TIME AN AGGREGATE OF ONE HUNDRED (100) SHARES OF ONE CLASS OF COMMON STOCK HAVING A PAR VALUE OF ONE DOLLAR(1.00\$) PER SHARE. THE CONSIDERATION TO BE PAID FOR EACH SHARE OF STOCK SHALL BE FIXED BY THE BOARD OF DIRECTORS.

### **ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

**Zulimar Figueira  
1470 NW 107Ave Suite P  
MIAMI, FL 33172  
President**

**Gladis Florez  
1470 NW 107Ave Suite P  
Miami, FL 33172  
Vice-President**

### **ARTICLE VI REGISTERED AGENT**

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

**Zulimar Figueira  
1470 NW 107Ave Suite P  
MIAMI, FL 33172**

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**ARTICLE VII INCORPORATOR**

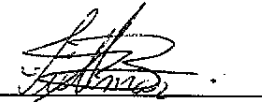
The name and address of the incorporator is:

Zulimar Figueira  
1470 NW 107 Ave Suite P  
MIAMI, FL 33172

*Having been named as registered agent and to accept service of process for the above place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

  
\_\_\_\_\_  
Signature/Registered Agent

08/08/02.  
\_\_\_\_\_  
DATE

  
\_\_\_\_\_  
Signature/Incorporator

08/08/02.  
\_\_\_\_\_  
DATE

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TALLAHASSEE, FLORIDA