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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 NOV -8 PM 3:34

FLORIDA PROFIT CORPORATION OR P.A.

MBC OFFICE SUPPORT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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NOV 8

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:

MBC OFFICE SUPPORT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*3252 RIVIERA DRIVE
CORAL GABLES, FL 33134*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSULTING

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

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

*MALINDA BRUCE
3252 RIVIERA DRIVE
CORAL GABLES, FL 33134*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*MALINDA BRUCE
3252 RIVIERA DRIVE
CORAL GABLES, FL 33134*

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

Malinda Bruce

Signature/Registered Agent

11-8-02

Date

Malinda Bruce

Signature/Incorporator

11-8-02

Date

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