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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

# FLORIDA PROFIT CORPORATION OR P.A.

## B. MARTINEZ CORP.

Certificate of Status	0
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SECRETARION OF STATE
TALLAHASSEF FLORIDA

#### ARTICLE OF INCORPORATION

OF

B. MARTINEZ CORP.

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

#### ARTICLE I NAME

The name of the corporation shall be: B. MARTINEZ CORP.

The principal place of business of this corporation shall be: 1850 SW. 23 ST. Mismd,F1.33145

#### ARTICLE II NATURE OF BUSINESS

This comporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or mation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

 $100 \times $10.00 = $1,000.00$ 

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE Y OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

BALDOMERO MARTINEZ DIRECTOR 1850 SW. 23 St. Mismi, Fl. 33145

MARIBEL DE LA CARIDAD FLORES DIRECTOR 1850 SW. 23 ST.

Minmi,F3.33145

BALDY MARTINEZ DIRECTOR

1850 SW. 23 ST.

Miami, Fl. 33145

### ARTICLE VI INCORPORATOR (S)

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

BALDOMERO MARTINEZ PRESIDENT BALDY MARTINEZ TREASURER
1850 SW. 23 St. (34 shares) 1850 SW. 23 St. (33 shares)
Mismi, F1. 33145
Mismi, F1. 33145

MARIBEL DE LA CARIDAD FLORES SECRETARY 1850 SW. 23 St. (33 shares)

signature/Title

Signature/Title

Signature/Title

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# 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:
	B. MARTINEZ CORF.
2.	The name and address of the registered agent and office
	is RECTOR J. HALI.
	(Nama)
	692 W. 29 St. # 9
	(P. O. BOX NOT ACCEPTABLE)
	Hialenh, Fl. 33012
	(CITY/STATE/ZIP)
	•
OF I AS I THEI RELI AND	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIREGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES ATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY STITION AS MY POSITION AS REGISTERED AGENT.
	DATE01-06-2003
	41-40-2003