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(Requestor's Name)

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☐ PICK-UP ☐ WAIT ☐ MAIL

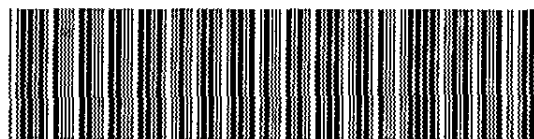
(Business Entity Name)

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RECEIVED
03 MAY -8 AM 11:38
DIVISION OF CORPORATION

FILED
03 MAY -8 PM 2:36
SEALING & STATE
TALLAHASSEE, FLORIDA

MAY 08 2003

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

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

1. COMMERCE SERVICES INTERNATIONAL
(Corporation Name) (Document #)
2. CORP.
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

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☐ Photocopy

☐ Certificate of Status

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

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: **COMMERCE SERVICES INTERNATIONAL** *Corp.*

ARTICLE II - PRINCIPAL OFFICE:

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

3460 FOXCROFT RD. STE # 12-206
MIRAMAR, FL. 33025

ARTICLE III - SHARES:

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and address of the initial registered agent is:

JOSE G. DUARTE
3460 FOXCROFT RD. STE # 12-206
MIRAMAR, FL. 33025

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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):

JOSE G. DUARTE
3460 FOXCROFT RD. STE # 12-206
MIRAMAR, FL. 33025

ARTICLE VI - DIRECTOR(S):

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

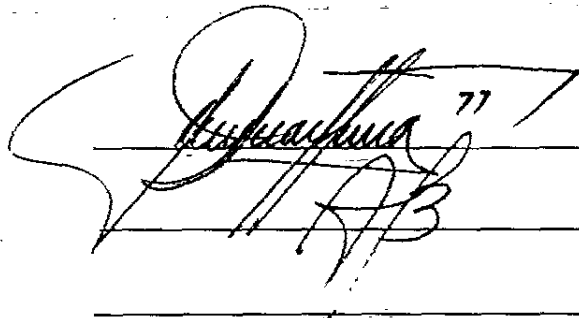
PRESIDENT

JOSE G. DUARTE
3460 FOXCROFT RD. STE # 12-206
MIRAMAR, FL. 33025

VICE-PRESIDENT

ANTONIO J. BRICENO
3460 FOXCROFT RD. STE # 12-206
MIRAMAR, FL. 33025

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this ____ day
of _____, 2003

Handwritten signatures of Jose G. Duarte and Antonio J. Briceno over horizontal lines. The signature of Jose G. Duarte is on the left, and the signature of Antonio J. Briceno is on the right. There is a small "77" written above the signature of Antonio J. Briceno.

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: **COMMERCE SERVICES INTERNATIONAL, *corp.***

2. The name and address of the registered agent and office is:

JOSE G. DUARTE
3460 FOXCROFT RD. STE # 12-206
MIRAMAR, FL. 33025

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 REGISTRERED 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 I FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DATE: 