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Florida Department of State

Division of Corporations Public Access System

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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.

MOTA DISTRIBUTORS CORP.

D. WHITE MAY 2 8 2003

Certificate of Status	0
Certified Copy	1
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FILED 03 MAY 27 AM 8: 19

SECRETARY OF STATE TALL AHASSEE FLORIDA

ARTICLE OF INCORPORATION

<u>of</u>

MOTA DISTRIBUTORS 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: MOTA DISTRIBUTORS CORP.

The principal place of business of this corporation shall be: 807 NW. 108 ST. MIAMI, FLORIDA 33168

APTICLE II NATURE OF BUSINESS

This corporation 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 nation.

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 x \$ 10.00 = \$1,000.00

ARTICLE IN TERM OF EXISTENCE

This corporation is to exist perpetually.

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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):

VLADYMIR MOTA 807 NW. 108 ST. MIAMI,FL. 33168 DIRECTOR

ARTICLE VI INCORPORATOR (S)

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

VLADYMIR MOTA 807 NW. 108 ST. MTAMI, FL. 33168

PRESIDENT, SEURHTARY & TREASURER
100 shares

The undersigned has(have) executed these Article of Incorporation this 27 th.day of May ,2003.

Signature/Title

Signature/Title

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SECRETARY OF STATE ---

CERTIFICATE OF DESIGNATION 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:_
	MOTA DISTRIBUTORS CORP.
2.	The name and address of the registered agent and office
	is <u>VLADYMIR MOTA</u>
	(Name)
	807 NW. 108 ST.
	(P. O. BOX NOT ACCEPTABLE)
	NIAMI, FLORIDA 33168
	(CITY/STATE/ZIP)
HAV	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE
of i	Process for the above stated corporation at the place desi Registered agent and agree to act in this capacity. I fur
THE.	R AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES
α_{ND}	ATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY
POS:	ition as my position as registered agent.
	SIGNATURE Allady Min moto
	DATE 5-27-2003