

**P04000045010**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H04000052874 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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.**

**MADY ILLUSIONS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

04 MAR 11 AM 10:44  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Electronic Filing Menu**

**Corporate Filing**

**Public Access Help**

HO4000052874 3

FILED  
04 MAR 11 AM 10:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
MADY ILLUSIONS, Inc.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

MADY ILLUSIONS, Inc.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

HO4000052874 3

### ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz: The main activity will be Clothing Sales.

(1) Transact any and all lawful business.

(2) Said corporation shall further have powers:

To have perpetual succession by its corporate name: Mady Illusions, Inc.

### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$ 10.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only ONE (1) class of stock of this corporation.

### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

Ena Z. Carmona  
1855 West 62<sup>nd</sup> St. Apt. 208  
Hialeah, FL 33012

The principal office shall be:

1855 West 62<sup>nd</sup> St. Apt. 208  
Hialeah, FL 33012

ARTICLE VI

The initial Board of Directors shall consist of a total of TWO (02) persons, and the name and address of the person who is to serve as an initial director is:

Ena Z. Carmona  
1855 West 62<sup>nd</sup> St. Apt. 208  
Hialeah, FL 33012

PRESIDENT

Jorge Q. Gonzalez  
1855 West 62<sup>nd</sup> St. Apt. 208  
Hialeah, FL 33012

SECRETARY  
TREASURER

The name and address of the subscriber of the Corporation is:

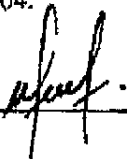
Ena Z. Carmona  
1855 West 62<sup>nd</sup> St. Apt. 208  
Hialeah, FL 33012

100 %

The name and address of the incorporator executing these Articles of Incorporation is:

Ena Z. Carmona  
1855 West 62<sup>nd</sup> St. Apt. 208  
MIAMI, FL 33183

IN WITNESS WHEREOF, the undersigned incorporator has (vc) executed these Articles of Incorporation this 10<sup>th</sup> day of March of 2004.

  
\_\_\_\_\_

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision 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:

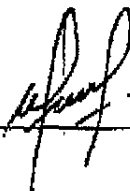
Mady Illusions, Inc..

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

Ena Z. Carmona  
1855 West 62<sup>nd</sup> St. Apt. 208  
Hialeah, FL 33012

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

SIGNATURE: \_\_\_\_\_



March 10<sup>th</sup> 2004

04 MAR 11 AM 10:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED