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| (Requestor's Name)                      |                   |           |  |
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| Certified Copies                        | _ Certificates    | or Status |  |
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| Special Instructions to Filing Officer: |                   |           |  |
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Office Use Only



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# TRANSMITTAL LETTER

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Department of State Division of Corporations P. O. Box 6327

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Tallahassee, FL 32314

2004 AUG 23 PM 3: 53

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: MARAYAN, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| S70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | ■ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
|-------------------|--|--|--|
| FROM: And         | ires Marquez<br>Name                       | (Printed or typed)                                   |  |
| 7                 | 764 Sherwood Terrace Dr., Apart            | ment #107  |  |
| -                 |  | Address  | <u> </u>   |
| <u> </u>          | Orlando, FL, 32818<br>City,                | State & Zip  |  |
| 1                 | 1-407-522-1407                             | <del>-</del>   |  |
| _                 | Daytime T                                  | elephone number                                      |  |

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

NOTE: Please provide the original and one copy of the articles.

# 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:

MARAYAN, Inc.

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TALLAHASSEE FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 764 Sherwood Terrace Drive, Apartment #107 Orlando, FL, 32818

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Information Technology Consulting on the UNIX field.

# ARTICLE IV SHARES

The number of shares of stock is: 100 (One Hundred)

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

-Andres Marquez / 764 Sherwood Terrace Dr., Apt. 107, Orlando, FL, 32818 / President -Anabel Yanez / 764 Sherwood Terrace Dr., Apt. 107, Orlando, FL, 32818 / Vice-President

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

-Andres Marquez / 764 Sherwood Terrace Dr., Apt. 107, Orlando, FL, 32818

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

-Andres Marquez / 764 Sherwood Terrace Dr., Apt. 107, Orlando, FL, 32818

| *********************************                                     | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~                              |
|---|---|
| Having been named as registered agent to accept service of proces     | ss for the above stated corporation at the place designated in this |
| certificate, I am familiar with and accept the appointment as registe | rred agent and agree to act in this capacity                        |
| Str 11  | 03/19/2004  |
| Signature/Registered Agent  | Date  |
|   | 09/18/2004  |
| Signature/Incorporator  | Pate  |