

P04000164745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

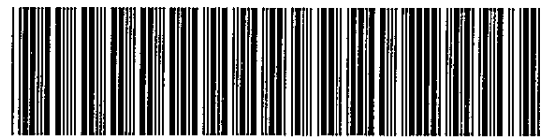
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600042228776

12/07/04--01021--026 *236.25

EFFECTIVE DATE
01/21/2005

FILED
04 DEC -7 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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TALLAHASSEE, FLORIDA

TA 12/15/04

EXPRESS CORPORATE FILING SERVICE INC.
Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101
Address

CORAL GABLES, FL 33134 (305) 444-4994
City/State/Zip Phone #

OFFICE USE ONLY

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

1. MAX2MAX INC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait 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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

04 DEC -7 AM 11:28

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

MAR2MAR INC

EFFECTIVE DATE: 01-01-2005

EFFECTIVE DATE
01/01/2005

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

11220 SW 112 TERRACE
MIAMI, FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARIA LUISA CASTILLO CASTRO (PD)
11220 SW 112 TERRACE
MIAMI, FL 33176

ENNIO DEVOTO (D)
11220 SW 112 TERRACE
MIAMI, FL 33176

ARTICLE VI REGISTERED AGENT

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

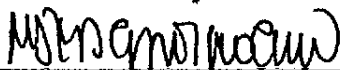
MARIA LUISA CASTILLO CASTRO
11220 SW 112 TERRACE
MIAMI, FL 33176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIA LUISA CASTILLO CASTRO
11220 SW 112 TERRACE
MIAMI, FL 33176

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

DECEMBER 06, 2004

Date



Signature/Incorporator

DECEMBER 06, 2004

Date