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Division of Corporations

NO.341 P.1/16

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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : JOSEPH M. SALOCCHI, P.A.
Account Number : 120000000147
Phone : (954)764-0005
Fax Number : (954)764-1479

FLORIDA PROFTT CORPORATION OR P.A.

Miramar II GP, Inc.

Certificate of Status	1
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**ARTICLES OF INCORPORATION
OF
MIRAMAR II GP, INC.**

ARTICLE I - NAME

The name of this corporation is: Miramar II GP, Inc. The principal address of the corporation is 2455 East Sunrise Boulevard, Suite AR1, Fort Lauderdale, FL 33304.

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE III - PURPOSE

The corporation may conduct any lawful business for which a corporation may exist under Chapter 607 of the Florida Statutes.

ARTICLE IV - STOCK

This corporation is authorized to issue 100 shares of NO par value common stock which shall be designated "Common Shares."

ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is: 2455 East Sunrise Boulevard, Suite AR1, Fort Lauderdale, FL 33304, and the name of the initial registered agent of this corporation at that address is: Steven Santolia.

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ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) Director(s) constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time in accordance with the By Laws. The name(s) and address(es) of the initial Board of Directors of this Corporation is (are):

NAME:	ADDRESS:
Steven Santolla	2455 East Sunrise Boulevard, Suite AR1 Fort Lauderdale, FL 33301
Thomas Lihan	2455 East Sunrise Boulevard, Suite AR1 Fort Lauderdale, FL 33301

ARTICLE VIII - INCORPORATORS

The name and address of each person signing these Articles is:

NAME:	ADDRESS:
Steven Santolla	2455 East Sunrise Boulevard, Suite AR1 Fort Lauderdale, FL 33301

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 17 day of April, 2005.


STEVEN SANTOLLA, SUBSCRIBER

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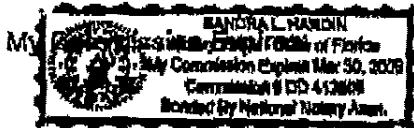
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STATE OF FLORIDA
COUNTY OF BROWARD

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared STEVEN SANTOLLA known to me to be the person who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed those Articles of Incorporation or who produced a valid Florida Drivers License as identification.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 11th day of April, 2005,



Andrea Hard
NOTARY PUBLIC

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST-THAT MIRAMAR II GP. INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT 2455 EAST SUNRISE BOULEVARD, SUITE AR1, CITY OF FORT LAUDERDALE, STATE OF FLORIDA, 33304, HAS NAMED STEVEN SANTOLLA, LOCATED AT 2455 EAST SUNRISE BOULEVARD, SUITE AR1, CITY OF FORT LAUDERDALE, STATE OF FLORIDA, 33304, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

TITLE

DATE _____

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HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

SIGNATURE

DATE _____

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