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Florida Department of State

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

ma rabu inc.

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ARTICLES OF INCORPORATION

·			<u> </u>
	Ma	Rabu	Inc.

OF

The undersigned incorporator(s), for the pupose of forming a Profit Corporation under Chapter 607 of the Florida Statues, hereby adopt(s) the following Articles of Incorporation.

Article I

The name of this corporation shall be:

Ma Rabu Inc.

Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

Article III

The principal place of business of this corporation is:

4454 Adams Ave Wiami Black, FL 33148

Article IV

The general nature of business of this corporation is to transact any and all lawful business.

Article V

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 VI

The name and street uddress of the initial Registered Agent of this corporation shall be:

Elias Hochner 4454 Adams Ave. Miami Beach, E 33140

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Article <u>VII</u>
The the name and address of the initial board of director(s) shall be:
Elias Hochner-4454 Adams Ave
Miami Beach FL 33140
Article VIII
The name and address of the incorporator executing these Articles of Incorporation is:
Elias Huchner
4454 Adams Ave
Miami Beach, Ft 33140
The undersigned has executed these Articles of Incorporation
this 14 day of November, 2005.
•

Incorporator

HU5000267891

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in the Articles of Incorporation, 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.

Registered Agent

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