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# I AZARIIS

CORPORATE FILING SERV	ICE
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CORPORATION NAME(S) & DOCUME	NT NUMBER(S), (if known):
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(Corporation Number)	(Document #)
2. (Corporation Name)	(Document #)
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Walk in Pick up time 20	
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NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

# **ARTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

## ARTICLE I - NAME

The name of the corporation shall be:

EZ DOCK of Miami Inc.

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#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall

94 NW 72nd Street Migmi Fl 33/50

### **ARTICLE III - SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

#### ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Marianela Rodriguez 17450 NW 850Y Miami, Fl 33015

#### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Michael Torres.

94 NW 72nd Street Miami, Fl 33150

The undersigned incorporator has executed these Articles of Incorporation this  $\partial$  day of  $March_22005$ 

Signature

#### **ARTICLE VI DIRECTOR(S)**

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

(President) Michael J. Torres / Marianela A. Rodriguez (Vice President) 17450 NW 850V MIAMI, Fl 33015

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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 Signature

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