Florida Department of State **Division of Corporations**

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Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247 : (800)494-3124 Phone

Fax Number : (305)675~2811

The state of the s

FLORIDA PROFIT/NON PROFIT CORPORATION

FLEXON U.S.A. AUTHORIZED DISTRIBUTOR CORP.

Certificate of Status	0
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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

FLEXON U.S.A. AUTHORIZED DISTRIBUTOR CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is

22007 SW 92ND PL MIAMI, FL 33190

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock

1500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR

EDEL RAMIREZ 22007 SW 92ND PL MIAMI, FL 33190

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FLEXON U.S.A. AUTHORIZED DISTRIBUTOR CORP.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

EDEL RAMIREZ 22007 SW 92ND PL MIAMI, FL 33190

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

EDEL RAMIREZ 22007 SW 92ND PL MIAMI, FL 33190

21.1 1.4

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.

Allo Coo

TORS RANGEZ / Reclater & Agent

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