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(Re	equestor's Name)	<u>.</u> .
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DIVISION OF CORPORATION

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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

	MARKETING ACTIONS, INC.	
SUBJECT:		
	(Proposed corporate name - must include suffix)	· · · · · · · · · · · · · · · · · · ·

Enclose is an original and one (1) copy of the articles of incorporation and a check for:

□ \$ 70.00 Filing Fee ☐ \$ 78.75
Filing Fee
& Certificate o Status

\$ 78.75 Friing Fee & Certificate Copy

☐ \$ 87.50 Filing Fee, Certificate Copy & Certificate Status

ADDITIONAL COPY REQUIRED

FROM: <u>RAMON REYES</u>
5035 PALM AVE
HIALEAH, FL 33012
(305) 822-0669

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

the state of the s		. ,
The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation	Act,	nereby
adopts the following Articles of Incorporation.		

ARTICLE I NAME

The name of the corporation shall be:

MARKETING ACTIONS, INC..

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8380 N.W. 103rd ST. #103 HIALEAH GARDENS, FL 33016

ARTICLE III SHARES

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

10,000 Common Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:

SANDRA L. RODRIGUEZ

8380 N.W. 103rd ST. #103 HIALEAH GARDENS, FL 33016

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

PRESIDENT/ SECRETARY SANDRA L. RODRIGUEZ

8380 N.W. 103rd ST. #103 HIALEAH GARDENS, FL 33016

08/10/06
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 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.

Signature/Registered Agent Date