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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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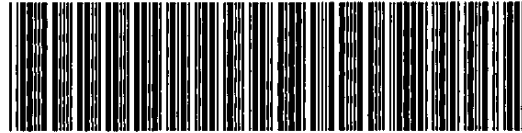
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
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## TRANSMITTAL LETTER

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

**SUBJECT:** CONNEXT, CORP.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

**FROM:** ANDREINA TOSTA TRAVIESA, REGISTERED AGENT  
Name (Printed or typed)

5440 N. STATE ROAD 7 SUITE 224  
Address

FORT LAUDERDALE, FL. 33319  
City, State & Zip

(954)394-6065  
Daytime Telephone number

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

## **Articles of Incorporation**

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We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida; adopt the following articles of incorporation:

### **FIRST**

The name of the corporation is: CONNEXT, CORP.

### **SECOND**

The period of its duration is Indefinite.

### **THIRD**

The purpose of the corporation is: Publishing Marketing & Advertising

### **FOURTH**

The aggregate number of authorized shares is 200 shares Par-Value \$5.00

### **FIFTH**

The corporation will not commence business until at least One Thousand (\$1,000.) Dollars have been received by it as consideration for the issuance of Shares.

### **SIXTH**

Cumulative Voting of shares of stock are authorized.

### **SEVENTH**

Provisions Limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: Approved by both the Stockholders and Board of Directors.

### **EIGHT**

Provisions for regulating the internal affairs of the corporation are The Managing Partners (Corporate Officers) will be responsible for all day to day operation.

#### **NINTH**

The address of the initial Registered Office of the corporation is :  
5440 N. State Road 7 Suite 224 Fort Lauderdale, Florida 33319  
and the name of it's initial Registered Agent at such address is:  
Andreina Tosta Traviesa

#### **TENTH**

Address of the principal place of business is:  
5440 N. State Road 7 Suite 224 Fort Lauderdale, Florida 33319

#### **ELEVENTH**

The number of directors constituting the initial board of directors of the corporation is ONE, and the names and address of the persons who are to serve as directors until the first annual meeting of the Shareholders or until their successors are elected and shall qualify are:

<u>NAME</u>	<u>ADDRESS</u>
* Andreina Tosta Traviesa D/Pres.	5440 N. State Road 7 Suite 224 Fort Lauderdale, Fl. 33319
* Francisco Jose Tosta D/Vicep.	5440 N. State Road 7 Suite 224 Fort Lauderdale, Fl. 33319

#### **TWELFTH**

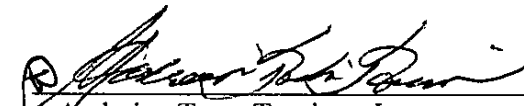
The name and address of each incorporator is:

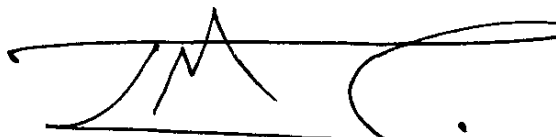
<u>NAME</u>	<u>ADDRESS</u>
* Andreina Tosta Traviesa D/Pres.	5440 N. State Road 7 Suite 224 Fort Lauderdale, Fl. 33319
* Francisco Jose Tosta D/Vicep.	5440 N. State Road 7 Suite 224 Fort Lauderdale, Fl. 33319

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Date: August 3, 2006

  
Andreina Tosta Traviesa, Incorporator

  
Francisco Jose Tosta, Incorporator

Having been named as Registered Agent and to accept services of process for the 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, my position as Registered Agent.

  
Andreina Tosta Traviesa, Registered Agent