

907006078750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

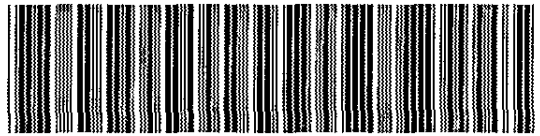
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300102077173

07/10/07--01024--015 \*\*78.75

DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

RECEIVED  
07 JUL 10 AM 11:16

SECRETARY OF REVENUE  
TALLAHASSEE, FLORIDA

FILED  
07 JUL 10 PM 2:11

01/12  
HS

**LAZARUS**  
**CORPORATE FILING SERVICE**

Requester's Name

**3320 S.W. 87<sup>TH</sup> AVENUE**

Address

**MIAMI, FL 33165 (305) 552-5973**

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. MICMAC DD FLORIDA, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

Walk in

Pick up time

2:00

Certified Copy

Mail out

Will wait

Photocopy

Certificate of Status

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

ARTICLES OF INCORPORATION

07 JUL 10 PM 2:11  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

MICMAC DD FLORIDA, INC

ARTICLE II - PRINCIPAL OFFICE

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

4000 PONCE DE LEON BLVD  
SUITE 470, CORAL GABLES, FL 33146

ARTICLE III - SHARES

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

100 SHARES

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

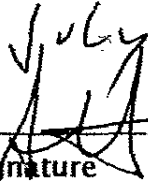
WILLIAM DE LEON  
4000 PONCE DE LEON BLVD  
SUITE 470, CORAL GABLES, FL 33146

ARTICLE V - INCORPORATOR

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

William DE LEON  
4000 PONCE DE LEON BLVD  
Suite 470, CORAL GABLES, FL 33146

The undersigned incorporator has executed these Articles of Incorporation this 09 day of July 2007

  
\_\_\_\_\_  
Signature

FILED  
07 JUL 10 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE VI- DIRECTOR(S)

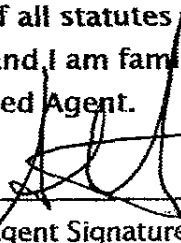
The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

William DE LEON - President  
Director - CAROL DAVIS  
Director - Zully KAMMANN

4000 PONCE DE LEON BLVD  
Suite 470, CORAL GABLES, FL 33146

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