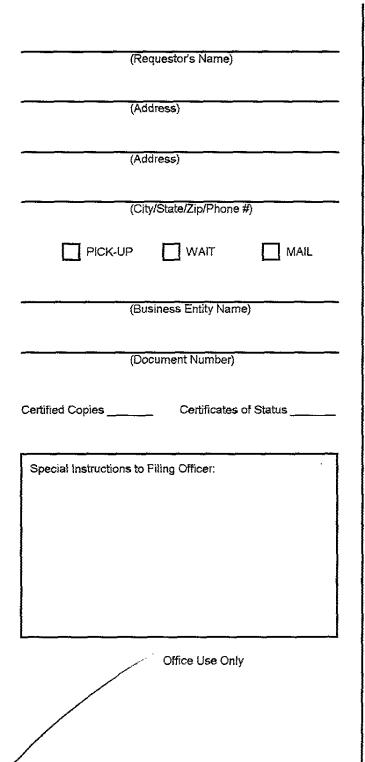
P07000112519





700110458567

10/11/07--01038--006 **78.75

2007 OCT 11 98 1:58

T. Burch OCT 1 2 2007

COVER LETTER

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

SUBJECT:	BJECT:		
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
i mag i ob	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
			Status
		ADDITIONAL COPY REQUIRED	

FROM: Mauricio Gutierrez

Name (Printed or typed)

16442 SW 58 Ter

Address

Hiami, FL 33193

City, State & Zip

(305) 215-6766

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2007 OCT 11 PM 1:58

TALLA TO LOSPATE

ARTICLE I NAME

The name of the corporation shall be:

MASF Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

16442 SW 58Ter Mlami, FL 33193

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all Lawful Business

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Mauricio Gutierrez 16442 SW 58 Ter Mami, FL 33193

RTICLE VI REGISTERED AGENT	
he name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Mauricio Butierrez	
16442 SW 58 Ter	
Mlami, FL 33193	
RTICLE VII INCORPORATOR	
he name and address of the Incorporator is:	
Mauricio Gutierrez	
16442 SW 58 Ter	
Mami, FL 3393	
****************	****************
aving been named as registered agent to accept service of process for the ab- rtificate, I am familiar with and accept the appointment as registered agent an	
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
MAIRICO RUI (EPEN)	10/6/2007
, Signature/Registered Agent	Date
· MAURICIOLIZATUSPESII	10/6/2007
Signature/Incorporator	Date

, a