

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : GONZALEZ & WERMUTH, P.L.

Account Number : 120020000138 Phone : (305)715-7157 Fax Number

: (305)715-8982

FLORIDA PROFIT/NON PROFIT CORPORATION

CrazyPricing.com, Inc.

Certificate of Status	2
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GONZALEZ AND WERMUTH

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7-10-0 SECRETARY OF STATE DIVISION OF CORPORATIONS

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CRAZYPRICING.COM. INC.

In compliance with the requirements of F.S. Chapter 607, the undersigned, being a natural person, hereby acts as an incorporator in adopting and filing the following. articles of incorporation for the purpose of organizing a business corporation.

ARTICLE I NAME

The name of the corporation shall be CrazyPricing.com, Inc.

ARTICLE II PRINCIPAL OFFICE

The initial principal place of business and mailing address of this corporation shall be: 8850 West Flagler, #12, Miami, Florida 33174.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for which corporations may be organized under the law of Florida.

ARTICLE IV SHARES

The number of shares of common stock that this corporation is authorized to have outstanding at any one time is: Fifty Million (50,000,000), each with a par value of \$0.01.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent shall be: CorpWiz Registered Agents, Inc., 8750 N.W. 36 Street, Suite 425, Miami, Florida 33178.

ARTICLE VI DIRECTORS

The names and street addresses of the initial directors of the corporation shall be: Ramesh Kasturia, 8850 West Flagler, #12, Miami, Florida 33174.

ARTICLE VII INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Ramesh Kasturia, 8850 West Flagler, #12, Miami, Florida 33174.

Date

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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. 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

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