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(Requestor's Name)

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(City/State/Zip/Phone #)

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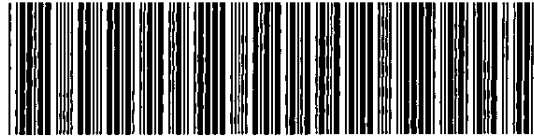
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAY -2 PM 4:38

5/2/08

**COVER LETTER**

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 MAY -2 PM 4:38

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

**SUBJECT:** PERENNIAL MARKETING, INC.

(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** AARON NINA

Name (Printed or typed)

8624 S.W. 15TH STREET

Address

PEMBROKE PINES, FL 33025

City, State & Zip

954-376-2244

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)

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**ARTICLE I NAME**

The name of the corporation shall be:

PERENNIAL MARKETING, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principle street address and mailing address, if different is:

8624 S.W. 15TH STREET  
PEMBROKE PINES, FL 33025

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

A MARKETING COMPANY

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

AARON E. NINA, 8624 S.W. 15TH STREET, PEMBROKE PINES, FL 33025, PRESIDENT

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

AARON E. NINA  
8624 S.W. 15TH STREET  
PEMBROKE PINES, FL 33025

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ELIU R. NINA  
8624 S.W. 15TH STREET  
PEMBROKE PINES, FL 33025

\*\*\*\*\*

*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*

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
3/24/08

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
3/24/08

\_\_\_\_\_  
Date