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# LAZARUS CORPORATE FILING SERVICE

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DRPORATION NAME(S) & DOCU	JMENT NUMBER(S), (if known):
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(Corpc ation Name)	(Document #)
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NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Nam	Foreign Limited Partnership Reinstatement

**Examiner's Initials** 

#### ARTICLES OF INCORPORATION

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:

MAGIC ENTERPRISES USA, INC.

2000 MAY -7 PM 4: 27 SECRETARY OF STATE TALL AHASSEE, FLORIDA

### ARTICLE II- PRINCIPAL OFFICE

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

4838 ATWOOD DRIVE ORLANDO, FL 32828

# ARTICLE III -SHARES

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

100

# <u>ARTICLES IV -INITIAL REGISTERED AGENT AND STREET</u> ADDRESS

The name and address of the initial registered agent is:

REINA PENA 16436 SW 84<sup>th</sup> LANE MIAMI, FL 33193

#### ARTICLE V INCORPORATOR

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

REINA PENA

16436 SW 84 LANE, MIAMI, FL 33193

GIOVANNI PENA

525 E. JACKSON ST. #609, ORLANDO, FL 33801

The undersigned incorporator has executed these Articles of Incorporation this 7 day of April 2008

Signature

#### **ARTICLE VI- DIRECTOR(S)**

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

REINA PENA – PRESIDENT
GIOVANNI PENA - DIRECTOR
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