P08000089409

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to I	Filing Officer:			

Office Use Only



700136206987

10/01/08--01008--008 **78.75



MRA

COVER LETTER

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

SUBJECT: Mati En	terprise, Inc.		
Englaced are an origin		ATE NAME – <u>MUST INCL</u>	
\$70.00 Filing Fee	ginal and one (1) copy of the art \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: M	ati Enterprise, Inc. Nam	e (Printed or typed)	
	1642 W Holden Avenue Apt. 20	Address	
	Orlando, FL 32839	y, State & Zip	
	321-945-5946	Telephone number	

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

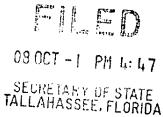
ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Mati Enterprise, Inc.



ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1642 W Holden Avenue Apt. 200 Orlando, FL 32839

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100 Common Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Rachel O'Neil, President 1642 W Holden Avenue Apt. 200 Orlando, FI 32839

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: USA-RA, LLC 841 Prudential Dr., 12th Floor

Jacksonville, FL 32207

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Rachel O'Neil

1642 W Holden Avenue Apt. 200 Orlando, FL 32839

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

(SEE ATTACHED)

Signature/Registered Agent	•	Date
Lahre M. O' rie		9-21-08
Signature/Incorporator	_	Date

Consent to serve as Florida Statutory Agent

I, Kyle Lavender, Managing Member of USA-RA LLC, hereby sign on behalf of USA-RA LLC who shall consent to serve as Statutory Agent in the state of Florida for:

Mati Enterprise, Inc.

I understand it will be our responsibility to accept service of process on behalf of the corporation, to forward mail addressed to the corporation in care of USA-RA LLC, and to immediately notify the Florida department of state if we resign or change the statutory office address. Our statutory office address and mailing address is:

USA-RA LLC

841 Prudential Drive Floor 12-6491007 Jacksonville, FL 32207 DA OCT -1 PH W. 47
SECREPARISSEE, FLORIDA

Signature of Agent

KYLE LAVENDER

Printed Name

9-16-08

USA-RA LLC

If signing on behalf of a company, please print company name here.