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| CORPORATION NAME(S) & DOCUM | MENT NUMBER(S), (if known): |
| PARTY DISCOUN (Corporation Name) | ST by MARIA CORP (Pocument #) |
| . (Corporation Name) | (Document #) |
| (Corporation Name) | (Document #) |
| (Corporation Name) | (Document #) |
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| OTHER FILINGS | REGISTRATION/QUALIFICATION |
| Annual Report Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other |
| | 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:

Party Discount by Maria CORP

ARTICLE II - PRINCIPAL OFFICE

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

1416 NE 29 St Pompano Beach, Fl 33064

ZEURE HAKE ELFLORIES

<u>ARTICLE III - SHARES</u>

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

One Hundred (100) shares of Non Par Value.

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Maria M. Tineo 1416 NE 29 St Pompano Beach, FI 33064

ARTICLE V - INCORPORATOR

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

Maria M. Tineo

1416 NE 29 St

PompanoBeach, Fl 33064

The undersigned incorporator has executed these Articles of Incorporation this 17 day of September of 2008

Marin Inco Signature

ARTICLE VI - DIRECTOR (S)

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

Maria M. Tineo President/ Treasurer

1416 NE 29 St Pompano Beach, Fl 33064

Nelson A. Tineo Vice President/ Secretary \$1416 NE 29 St

Pompano Beach, Fl 33064

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.

Marin / nco
Registered Agent Signature