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DEPARTMENT OF STATE
OF CORPORATION
2009 FEB 26 AM II: II
NOT HITEHOED
SUFFICIENCY OF CORPORATION

EP 2/27/09

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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RPORATION NAME(S) & DOCUM	TENT NUMBER(S), (if kno	own):
M.A.T. CON	ISULTING	ė
(Corporation Name)	(Document #)	
MARKETING	INC	
(Corporation Name)	(Document #)	
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Profit Not for Profit	Amendment Resignation of R.A.,	Officer/Director
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Fictitious Name	Limited Partnership	
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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:

M.A.T. CONSULTING & MARKeting, INC

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

14580 SW315t MIAMIFL 33175



<u>ARTICLE III - SHARES</u>

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

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

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

ANGELA AGÜERO 14580 SW 315t MIAMI FL 33,75

ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

ANGELA AGÜERO MAX ANDREW CANOVAS 14580 SW3, st, MIAMIFL 33175

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS

25 DAY OF FEBRUARY, 200 9

SIGNATURE

ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

ANGELA AGÜERO - PRES

MAX ANDREW CANOVAS - VICE-PRES

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

DFFICE

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