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Division of Corporations

Fax Number : (850) 617-6381

Account Name : FASTKIT CORPORATE OUTFITS

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### FLORIDA PROFIT/NON PROFIT CORPORATION

MALEBASICS CORP.

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7/6/2009

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# ARTICLES OF INCORPORATION FOR MALEBASICS CORP.

#### ARTICLE I

The name of the Corporation shall be:

#### MALEBASICS CORP.

ARTICLE II

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

#### 1675 NW 97<sup>TH</sup> AVE. DORAL, Florida 33172

#### ARTICLE III

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

#### 7500 SHARES

ARTICLE IV

The name and address of the initial registered agent is:

MARCO RAMIREZ 1675 NW 97<sup>TH</sup> AVE. DORAL, FL 33172 SECRETARY OF STATE TALLAHASSEE ELOPINA

#### ARTICLE V

This corporation shall have officers and directors initially. The names and addresses of the initial officers and directors who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

MARCO RAMIREZ 1675 NW 97<sup>TH</sup> AVE. DORAL, FLORIDA 33172

#### ARTICLE VI

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

MARCO RAMIREZ 1675 NW 97<sup>TH</sup> AVE. DORAL, FLORIDA 33172

The undersigned has executed these Articles of Incorporation the 1st Day of July, 2009.

RAMIREZ

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

1. The name of the Corporation is:

#### MALEBASICS CORP.

2. The name and address of the registered agent and office is:

MARCO RAMIREZ 1675 NW 97<sup>TH</sup> AVE.

DORAL, FLORIDA 33172

**SIGNATURE** 

TITLE:

President

DATE:

July 1, 2009

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE:

TARY OF STATE ASSEE, FLORIDA