065704 AUG-04-Cor ivision o ions Florida Department of State Division of Corporations Public Access System **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H090001751763))) H090001751763ABC3 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6381 From: Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : 12000000146 PH L: Phone : (305)444-4994 Fax Number : (305)444-4977 σ

FLORIDA PROFIT/NON PROFIT CORPORATION

POGONZA DESIGN INC.

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SECRETARY OF STATE

TALLAHASSEE. FLORIDA

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:

POGONZA DESIGN INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 549 ALBATROSS STREET MIAMI SPRINGS FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): LILIANA MELNIK - PRESIDENT 549 ALBATROSS STREET MIAMI SPRINGS FL 33166

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: LILIANA MELNIK 549 ALBATROSS STREET MIAMI SPRINGS FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: LILIANA MELNIK 549 ALBATROSS STREET MIAMI SPRINGS FL 33166

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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 conaction.

signature/Registered Agent incorporator

08-03-2009
Date
08-03-2009
Date