

PO9000097873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

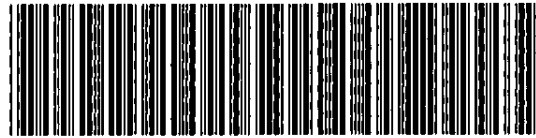
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200162978532

12/03/09--01004--007 **78.75

RECEIVED
09 DEC -3 AM 10:13
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 DEC -3 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
12/4

ECFS

FILED

09 DEC -3 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EXPRESS CORPORATE FILING SERVICE, INC
1000 PONCE DE LEON BLVD., STE: 101
CORAL GABLES, FL 33134
PH: (305)444-4994 FAX: (305)444-4977

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. MATANZAS PLAZA, INC
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

- Walk in
- Pick up time
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION
OF
MATANZAS PLAZA, INC**

FILED

09 DEC -3 AM 10: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MATANZAS PLAZA, INC

Article II - Principal Office

The principal place of business shall be:

26001 SW 207 AVE
HOMESTEAD, FL 33133

Article III - Shares

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

ONE THOUSAND (1,000)

Article IV - Purpose

To carry on and engage in any and all lawful business or businesses.

Article V - Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

BRENDA GOTAY
26001 SW 207 AVE
HOMESTEAD, FL 33133

Article VI – Incorporator(s)

FILED

09 DEC -3 AM 10:25

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME	OFFICE	ADDRESS	SHARES
BRENDA GOTAY	PRESIDENT REG-AGENT V-PRESIDENT SECRETARY	26001 SW 207 AVE HOMESTEAD, FL 33133	100%

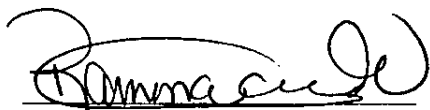
Article VII Directors

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

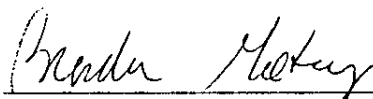
The same as Incorporators.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

1 day of December 2009



WITNESS:



BRENDA GOTAY

FILED

09 DEC -3 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statute, 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: **MATANZAS PLAZA, INC**

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

BRENDA GOTAY
26001 SW 207 AVE
HOMESTEAD, FL 33133

During been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

x  (Seal)
BRENDA GOTAY