

Florida Department of State

Division of Corporations
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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION FINNEGANS MULTITECH & MENA DISTRIBUTION INC

Certificate of Status

Certified Copy 1

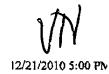
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

<u>ARTICLE I – NAME</u>

The name of the corporation shall be:

FINNEGANS	MUCIFIECH	o MENT
BISTRIBUTIO	on INC	(EFFECTIVE 1-1-11)
ARTICLE II – PRINCIPAL OFFICE		

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

MAILING: 6742 FOREST HILL BLUD SUITE # 254 WEST PALM BEACH FL 33413 PRINCIPAL: 4851 NW 123 QVE SUITE 51 ARTICLE III-SHARES SUNRISE FL 33351

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

100 SHARES

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

The name and address of the initial registered agent is:

JORGE CUBILLA-FERNANDEZ 4851 NW 103 AVE SUITE 51 SUNRISE FC 33351

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

<u> ARTICLE V – INCORPORATOR</u>

The name and address of the incorporator to these Articles of Incorporation is:			
JORGE CUBILLA - FERNANDEZ			
4851 NW 103 AVE SUITE 51			
SUNRISE FL 33351			
The undersigned incorporator has executed these Articles of Incorporation this			
day of 20			
· · · · · · · · · · · · · · · · · · ·			
Signature			

ARTICLE VI- DIRECTOR (S)

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

JORGE CUBILLA - FERNANDEZ President)

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.

Registered Agent Signature

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