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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
MARTINEZ VAN SERVICES, CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2/3/12
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME MARTINEZ VAN SERVICES, CORP.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
3710 NW 3 AVE
MIAMI, FL 33136

Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: 100 @ 10.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>PRESIDENT</u>	Name and Title: _____
Address: <u>ROMINA P. ROLON</u>	Address: _____
<u>301 NW 37 ST</u>	_____
<u>MIAMI, FL 33136</u>	_____
Name and Title: <u>VICE PRESIDENT</u>	Name and Title: _____
Address: <u>ABRAHAM BRAVO</u>	Address: _____
<u>301 NW 37 ST</u>	_____
<u>MIAMI, FL 33136</u>	_____
Name and Title: <u>SECRETARY/TREASURER</u>	Name and Title: _____
Address: <u>RUBEN ROLON</u>	Address: _____
<u>301 NW 37 ST</u>	_____
<u>MIAMI, FL 33136</u>	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

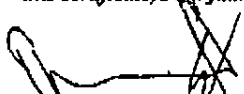
Name: RUBEN ROLON
Address: 301 NW 37 ST
MIAMI, FL 33136

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

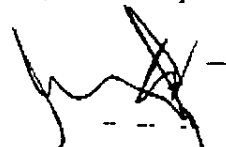
Name: RUBEN ROLON
Address: 301 NW 37 ST
MIAMI, FL 33136

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 capacity

 _____
Required Signature/Registered Agent

02/02/2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 _____
Required Signature/Incorporator

02/02/12
Date

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