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Division of Corporations

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To:

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

From:

Account Name : BARINAS & ASSOCIATES INC.
Account Number : I20000000082
Phone : (305) 871-0889
Fax Number : (305) 870-9623

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13 OCT 15 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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
SINERGY MAX INC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

13 OCT 15 AM 11:59

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:

SINERGY MAX INC

ARTICLE II: PRINCIPAL OFFICE

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

**31 SE 5TH ST
APT 4018
MIAMI, FL 33131**

ARTICLE III: SHARES

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

2000 SHARES AT NO PAR VALUE

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**ELADIA PIMENTEL
31 SE 5TH ST
APT 4018
MIAMI, FL 33131**

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TALLAHASSEE, FLORIDA

ARTICLE V: INCORPORATORS

ELADIA PIMENTEL
31 SE 5TH ST
APT 4018
MIAMI, FL 33131

ARTICLE VI: OFFICERS/DIRECTORS

PRESIDENT

ELADIA PIMENTEL
31 SE 5TH ST
APT 4018
MIAMI, FL 33131

VICEPRESIDENT

MERCEDES D LOPEZ MERO
31 SE 5TH ST
APT 4018
MIAMI, FL 33131

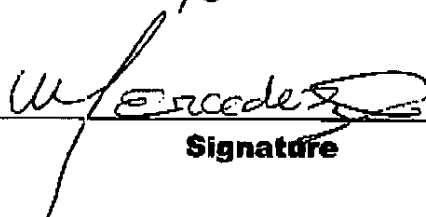
The undersigned incorporator (s) has (have) executed these Articles of Incorporation this:

15TH OCTOBER
____ day of _____, 2013

(An additional article must be added if an effective date is requested.)



Signature



Signature

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE** SECRETARY OF STATE
TALLAHASSEE, FLORIDA
**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.**

The name of the corporation is:

SINERGY MAX INC

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

ELADIA PIMENTEL

**31 SE 5TH ST
APT 4018**

(P.O. BOX OR MAIL DROP BOX NOT ACCEPTABLE)

MIAMI, FL 33131

(CITY, STATE, ZIP)

***Having been named as registered agent and 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)

October 15, 2013

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314