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Fax Number : (850) 617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION
GEMA MULTI SERVICES INC

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

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MD 12/4

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ARTICLES OF INCORPORATION
OF

GEMA MULTI SERVICES INC.

The undersigned incorporation(s), for the purpose of forming a corporation under the Florida Business Corporation Act. Hereby adopt(s) the following Articles of Incorporation.

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TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

GEMA MULTI SERVICES INC

ARTICLE II PRINCIPAL OFFICE

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

2525 NW 10 AVE STE, 302
MIAMI FL, 33127

ARTICLE III CAPITAL STOCK

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

3000 share, USD 1.00 per share USD 3,000.00

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ARTICLE IV REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Gema Fonseca
2525 NW 10 Ave Ste, 302
MIAMI FL, 33127

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATION(S)

The name(s) and street address(es) of the incorporator (s) to these articles of incorporation is (are)

Gema Fonseca
2525 NW 10 Ave Ste. 302
Miami FL, 33127

The undersigned has (have) executed these articles of incorporation this 01st day of March, 2010.

X Gema Fonseca /President

Signature/Title



_____/Vicepresident

Signature/Title

_____/treasure

Signature/Title

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.325 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:

GEMA MULTI SERVICES INC.

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

Gema Fonseca

2525 NW 10 Ave Ste. 302

(P.O. BOX NOT ACCEPTABLE)

Miami FL 33127

(CITY/STATE/ZIP)

X Signature: _____

(CORPORATE OFFICE)

Title: _____

Date: _____

Having 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, and I accept the duties and obligations of section 607.325, Florida Statutes.

X Signature: _____

Date: _____

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