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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (3<del>0</del>5)552-5973

Fax Number : (305)675-5944

\*\*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 MELCON GROUP CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME . T.

INAME: The name of the corporation is:		
MELCON GROUP CORP.		
ARTICLE II PRINCIPAL OFFICE:		_
The principal street address and mailing address is:		
8430 SW 15th Tex.		
8430 SW 15th TER.  Winn, Fl , 33144	-	
	_	
ARTICLE III SHARES: The number of shares of stock is: 100	·	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
LiAURT MEICON BARRIDO (P)  LIAURT MEICON ESCRIBO (VP)	_	
LIAURT MEICON IESCRIBA (VP)		
	<u> </u>	3
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	ARY SSBARY	3
	<u> </u>	
ARTICLE V INITIAL REGISTERED AGENT AND STREET AND DE	STAT	} T
The name and Florida street address (PO Box not acceptable) of the registered ag	SST F	1
RAY JOSE ME ICON GARRIAL	ent is:	
RAY JOSE ME ICON GARRICAI  8430 SW 15th TER.	_	
MIANI, Fl , 33 144	<del></del>	
ARTICLE VI INCORPORATOR: The name and address of the Incorporat	tor is:	
RAY JOSE LECON GARRIDO  8430 SW 15th TER	_	
	<del></del>	
MANIE 1 33144		

## Required Signatures:

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

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.847.155; F.S.