

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000300492 3)))



H190003064923ABC

To:			<u> </u>
	Division of Co	orporations	,
	Fax Number	: (850)617-6381	
From:			.
	Account Name		二.3:
		r : I20000000019	1
	Phone	: (305)552-5973	
	Fax Number	: (305)675-5944	
*Enter	the email addre	ss for this business entity to be used for fo	
		ings. Enter only one email address please.**	rture

FLORIDA PROFIT/NON PROFIT CORPORATION

LMDR WHOLESALE INC

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:
LMDR Wholesale INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
4841 5W 142 PL FL 33175
MIAMI
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND (OR COMPAND)
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE S: QUIS MONUEL DIAZ ROMETO (P)
MAC Romery
20 20 20 20 20 20 20 20 20 20 20 20 20 2
9
ARTICLE V INITIAL REGISTERED ACENT AND CONTRACT "
The name and Florida street address (PO Box not acceptable) of the registered agent is:
LUIS MANUEL DIAZ ROMERO
4841 SW 142 PL
MIAMI FL 33175
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
LUIS MANUEL DIAZ ROMERO
4841 SW 142 PL
NAIANAI FI 32175

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

Registered Agent 1) Record 1) Bate

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.

Incorporator O O I ate