Division of Corporations Electronic Filing Cover Sheet

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		O de A C A Marie Control
To:		
	Division of Co	rporations
		: (850)617-6381
From:		
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.
*	Account Number	: I20000000019
	Phone	: (305)552-5973
	Fax Number	: (305)675-5944
**Enter 1	the email address	for this hustness antitude to be a second
200	ual connet maili	for this business entity to be used for future
41111	nor rebour waill	ngs. Enter only one email address please.**

FLORIDA PROFIT/NON PROFIT CORPORATION NAKA MULTI SERVICES CORP

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

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ARTICLES OF INCORPORATION

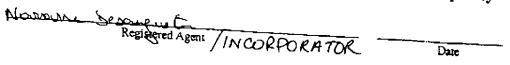
In compliance with Chapter 607 (Profit)

ARTICLE | NAME: The name of the corporation is:

NAKA MULLI GERVICES CORP
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
2430 N.W 101 St 33147-
MIAMI FL
ARTICLE III SHARES; The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICER'S:
NAVARRE JACQUES DESAUGUSÉE
PRESIDENT
·
·
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
711771 DE 211000 DE 34000310
2430 NW 101 ST
MIAMI PC 33177
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
NAVARRE JACQUES DESAUGUSTE
2430 NW 101 ST
MIAMI FL 33147

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.817.155, F.S.