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NEW FILINGS	AMENDMENTS		୍ରି କ୍ରିଲ ଅନ୍		
Profit	Amendment		F F		
NonProfit	Resignation of R.A., Officer/	Director	CO .		
Limited Liability	Change of Registered Agent		NACKENTO 95 APR -7 ANIO: 57 Western of Corporation		
Domestication	Dissolution/Withdrawal		2 9 77 3 5		
Other	Merger		7		
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OTHER FILINGS	REGISTRATION/ QUALIFICATION				
Annual Report	Foreign				
Fictitious Name	Limited Partnership				
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Examiner's Initials

Name Reservation

CR2E031(10/92)

Reinstatement Trademark

Other

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95 APR -7 PH 1:53

MEMOXLINE INTERNATIONAL INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

MEMOXLINE INTERNATIONAL INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) / Transact any and all lawful business.
- (2) Said corporation shall further have powers: To have perpetual succession by its corporate name;

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 500 shares, having an individual par value of \$1.00 (ONE DOLLAR)

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial principal office and the name of the initial Resident Agent of this corporation shall be:

Luis Amador 8181 N.W. 67th Street Minmi, Fl. 33166

The principal office shall be:

8181 N.W. 67th Street Miami, Fl. 33166.

ARTICLE VI

The initial Board of Directors shall consist of a total of One (1) person, and the name and address of the person who is to serve as an initial director is:

Luis Amador 8181 N.W. 67th Street Miami, Fl. 33166 The name and address of the incorporator executing there Articles of Incorporation is:

Luis Amador 8181 N.W. 67th Street Miami, Fl. 33166

	ואדנא אנ	ESS WHEREO	F, the u	ndersigned	incorpor	ator	has
(ve)	executed	these Art	icles of	Incorpora	tion this	6	day
of	Apr 11		, 1	<u>9 95</u>			

Thus Chunches

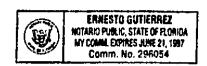
STATE OF FLORIDA) SS. COUNTY OF DADE)

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared Luis Amador known to me and known by me to be the person(s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this _6_ day of _April ______, 1995 .

NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires:



CURTIFICATE OF DESIGNATION REGISTERED AGENT REGISTERED OFFI

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

1.	The name of the corporation is: MEMOXI.INE INTERNATIONAL INC.
2. 3	The name and address of the registered agent and office is:
	LUIS ANADOR
-	(NAME)
	8181 N.W. 67TH STREET, SUITE # 201
	(P.O. BOX <u>HOT</u> ACCEPTABLE)
	MIAMI, FL. 33166
•	(CITY/STATE/ZIP)
PRO THIS ND PRO FOR	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF DECESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN SCENTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT DIAGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE DIVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGANS OF MY POSITION AS REGISTERED AGENT.
	SIGNATURE 2 Juin Plumaling
	DATE 4_6_05