

P9500046491

Chapter Number Only

6/14/95

TRINY ANDRES

Requestor's Name

147 Alhambra Circle #200

Address

Coral Gables FL 33134

City

State

ZIP

Phone

VALIDATION ONLY

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-06/15/95--01020--013
****122.50 ****122.50

CORPORATION(S) NAME

SYNCRONICS, INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1995 JUN 15 PM 1:56

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EMPIRE Toll Free: 1-800-432-3028

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> NonProfit	<input type="checkbox"/> Dissolution	<input type="checkbox"/> Mark
<input type="checkbox"/> Foreign	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Reservation	<input type="checkbox"/> Change of Registered Agent
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Photo Copies	<input type="checkbox"/> Certificate Under Seal
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> After 4:30	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Will Wait	<input type="checkbox"/> Mail Out	<input type="checkbox"/> Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY

R. CHESSER JUN 15 1995

ARTICLES OF INCORPORATION

OF

SYNCRONICS, INC.

The undersigned, acting as incorporators of a Corporation under the Florida General Corporation Act, adopt the following Articles of Incorporation for such Corporation:

I.

The name of the Corporation is

SYNCRONICS, INC.

II

The period of duration of the Corporation is perpetual.

III.

The Corporation is created for the purpose of engaging in any and all things allowed and permitted to be done under the statutes of the State of Florida, and to do any and all of the things herein after mentioned as fully and to the same extent as natural persons might or could do, to wit:

(a) Generally, to make and perform contracts of any kind and description, and for the purpose of attaining any of the objects of the Corporation, to do and perform any other acts or things, and to exercise any and all powers which a co-partnership or natural person could do and exercise, and which are now, or hereafter may be authorized by law, and generally do and perform any and all things necessary or incidental to the performing or carrying out of the powers hereinabove specifically delegated or implied.

IV.

Authorized Shares

Number. The aggregate number of shares that the Corporation shall have the authority to issue is Seven Thousand Five hundred (7500) shares of Capital Stock with a par value of One (\$1.00) Dollar per share.

Initial issue. One hundred (100) shares of the Capital Stock of the Corporation shall be issued for cash at a par value of One (\$1.00) Dollar per share.

Dividends. The holders of the outstanding capital stock shall be entitled to receive, when and as declared by the Shareholders, dividends payable either in cash, in property, or in shares of the capital stock of the Corporation.

V.

The initial street address in Florida of the initial principal office of the Corporation is:

11720 S.W. 104th Avenue
Miami, FL 33176

The initial place of business of the corporation is :

11720 S.W. 104th Avenue
Miami, FL 33176

and the name of the initial registered agent is:

ANA MARIA MEJIA-LARREA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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whose registered office is located at:

11720 S.W. 104th Avenue
Miami FL 33176

The undersigned agrees to act as the registered agent for the Corporation for service of process pursuant to applicable Florida Statutes.


ANA MARIA MEJIA-LARREA

VI.

The Corporation shall have no directors. The business of the Corporation shall be managed by the stockholders of the Corporation in accordance with the Florida statutes.

VII.

INITIAL OFFICERS: The initial officers of the corporation are:

PRESIDENT: ANA MARIA MEJIA-LARREA

SECRETARY: ANA MARIA MEJIA-LARREA

VIII.

The names and addresses of the initial incorporators and subscribers are as follows:

ANA MARIA MEJIA-LARREA
11720 S.W. 104th Avenue
Miami, FL 33176

IX.

The shareholders shall have the power to adopt, amend, alter, change or repeal the articles of incorporation when proposed and approved at a stockholders meeting, with not less than a unanimous vote of the common stock.

X.

The stockholders shall at the first meeting called for that purpose, adopt By-Laws not inconsistent with these Articles and which shall be for the government of the Corporation and subordinate to these Articles of Incorporation and the laws of the State of Florida and the United States.

IN WITNESS WHEREOF, THE UNDERSIGNED has made and subscribed to these Articles of Incorporation at Miami, FL, on the first day of June, 19 95.


ANA MARIA MEJIA-LARREA

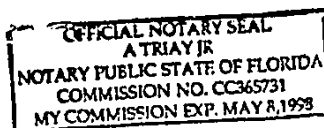
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TALLAHASSEE, FLORIDA

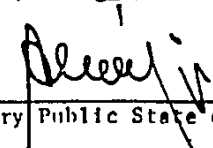
STATE OF FLORIDA:

COUNTY OF DADE :

Before me, the undersigned authority, appeared ANA MARIA MEJIA-LARREA, who is to me known to be the person described in and who subscribed to the above Articles of Incorporation, and he did freely and voluntarily acknowledge before me according to law that he made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and my official seal, at Miami, FL, in said County and State this first day of June, 19-95.




Notary Public State of Florida

My Commission expires:

STATE OF FLORIDA:

COUNTY OF DADE :

Before me, the undersigned authority, appeared _____, who is to me known to be the person described in and who subscribed to the above Articles of Incorporation, and he did freely and voluntarily acknowledge before me according to law that he made and subscribed the same for the purpose therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and my official seal, at _____, in said County and State this _____ day of _____, 19 ____.

Notary Public State of Florida

My Commission expires: