P9500050401

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: M.R.R. Distributors, Inc.

500001523385 -06/26/95--01088--016 *****78.75 *****78.75

	(Proposed corporate	name - must include suffix)		
Enclosed is an orig for : \$70.00 Filing Fee	ginal and one (1) co xxxx \$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	and a check	·
FRO		Ryan Robbins (printed or typed)	225 PH 1:	Property
	11975 s.	W. 49 ST.	3	*
		Address	·	
·		orida, 33175 ly, State & Zip		
	(305) 559-	4510		
	Daytime	Telephone number		

SDG

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> ARTICLEI NAME

The name of the corporation shall be: M.R.R. Distributors, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 11975 S.W. 49 ST. Miami, Florida, 33175

> ARTICLEIII SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Seven Thousand shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Michael Ryan Robbins 11975 S.W. 49 ST. Miami, Florida, 33175

INCORPORATOR(S) ARTICLE V

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Michael Ryan Robbins 11975 S.W. 49 ST. Miami, Florida, 33175

The und	ersigned incorporator(s) has(hav	ve) executed these Articles of Incorporation this
21	day of <u>June</u>	
	Mekul Ky	Signature Signature
		Signature
		Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: M.R.R. Distributors, Inc.
2.	The name and address of the registered agent and office is:
	Michael Ryan Robbins (NAME)
	11975 S.W. 49 ST. (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
	Miami, Florida, 33175 (CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance c_j my duties, and I am familiar with and accept the obligations of my position as registered agent.

Medeuel Reyan Holeh 6-21-95 (DATE)