P9600083460

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

		DUARDO MANTII porate name - must include su	
			3000019 -10/07/96010 *****78.75
ed is an original a	and one(1) copy of the artic	cles of incorporation and a	chack for :
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
ROM: <i>EL</i>	Name (Print	uez_	9
	N. W. 36 H		96 OCT -7 PH 4: 16
	Add	ress	-

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

Daytime Telephone number

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.

> **ARTICLE I** NAME

The name of the corporation shall be:

ANORES EQUARDO MARTIN, INC.

PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

100 N.W. 36M ST.

MIAMI Fl. 33127

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000

INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

DAVID POLLACK, ESq.

44 W. FLAGLER #408 MIAMI, FL 33130

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

EDUANDO RODRIGHLEZ 1254 OPEXEL AVE #12 MIAMI BEAGH FL 33139

The un	dersigned i	incorporator(s) ha	is(have) executed	d these Arti	cles of Inco	promision (
/	_ day of _	October	, 19	96	•	
(An add	itional arti	cle must be added	l if an effective d	late is requ	ested.)	
		Theory	lo Voden Signal			
	_		Signal	Mre		
			Signat	ure		
			Signati	line		

Notarization is not required

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.

2 The	-					
2. The name and addr	ess of the registe	red agent and	office is:			
_	DAVID	Pollac (NAME)	n Esg	· .	4000	OC OUT -1
_	44 W.	FLAGLE	2 4408		•	- 7 COR
•	(P.O. Box 6	r Mail Drop Box	NOT ACCEPTABL	2)		PORAL
	MIAM	FL	33/30 (49)			
		(CITY/STATE	74 0)			ο·
igent and agree to act elating to the proper ar	i aesignaiea in a in this capacity. Id complete perfi	ns certificate, I further agre armance of m	I hereby accep	the appointm	ent as regis	tered
gent and agree to act elating to the proper ar	i aesignaiea in a in this capacity. Id complete perfi	ns certificate, I further agre armance of m	I hereby accep	the appointm	ent as regis	tered
Having been named a corporation at the place ingent and agree to act elating to the proper arbligations of my position.	in this capacity. In this capacity. In complete perform as registered.	ns certificate, I further agre armance of m	I hereby accep	the appointm	ent as regis	tered