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TRANSMITTAL LETTER

97 FEB -6 PM 3:11

TALLAHASSEE, FLORIDA

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

SUBJECT: Morrieth, Inc.
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 122.50.

FROM:

Guillermo Torres

Name

5035 SW 99 AVE.

Address

MIAMI, FL - 33165

City, State, & Zip

(305) 596-1998

Telephone Number

Guillermo Torres

700002080817--9

02/06/97-01131-014

***122.50 ***122.50

cert of dep
of RA
RT

Note: Additional copy of articles is needed when certified copy is requested.

RT
2/7/97

CERTIFICATE OF INCORPORATION

OF

MORRITH, INC.

FILED

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STATE
TALLAHASSEE, FLORIDA

WE, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida.

1. The name of the corporation shall be:

MORRITH, INC.

and its existence shall be perpetual.

2. The general nature of the business to be transacted shall be IMPORT & EXPORT PRODUCE, and to invest in property of any kind, operate businesses, lend money, and to have all other powers provided by the laws of the State of Florida.

3. The capital stock of the corporation shall consist of fifty (50) shares, without nominal par value.

4. The amount of capital with which this corporation shall begin business is not less than FIVE HUNDRED DOLLARS.

5. The principal office of this corporation shall be 8730 SW 133 Ave. Rd., Suite 12410, Miami, Fl. 33183.

6. The number of directors shall be at least one (1), and the names and post office addresses of the first Board of Directors and Officers are:

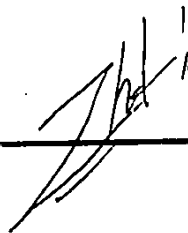
<u>NAME</u>	<u>OFFICE</u>	<u>POST OFFICE ADDRESS</u>
1. HECTOR MONNIER	DIRECTOR PRESIDENT	8730 SW 133 Ave. Rd. 12410 Miami. Fl. 33183.

7. The names and post office addresses of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefore, the proceeds of which will amount to not less than FIVE HUNDRED DOLLARS (\$500.00), are as follows:

<u>NAME AND ADDRESS</u>	<u>NO. OF SHARES</u>	<u>CONSIDERATION</u>
1. HECTOR MONNIER 8730 SW 133 Ave. Rd.12410 Miami, Fl. 33183	50	\$ 500.00

8. HECTOR MONNIER is hereby designated as the
Registered Agent for the corporation and 8730 SW 133 Ave.Rd.
Suite 12410, Miami, Fl. 33183 its address.

IN WITNESS WHEREOF, the undersigned hereby subscribe to this
Certificate of Incorporation at Miami, Florida this 31 day of
JANUARY, 1997, for the uses and purposes aforesaid.



STATE OF FLORIDA)
) SS.
COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared

HECTOR MONNIER

subscriber(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they did subscribe thereto, and did so for the uses and purposes therein contained.

SWORN TO and SUBSCRIBED before me at Miami, Dade County, Florida this the 31 day of JANUARY, 1997



Notary Public, State of FL

My Commission Expires:



GUILLERMO TORRES
My Comm. Exp. 6/23/98
Bonded By Services Ins.
No. CC 386693
☐ Personally Known ☐ Other I.D.

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATING PLACE OF BUSINESS
OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN
FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 28.091, Florida Statutes, the
following is submitted:

FIRST--THAT

desiring to organize or qualify under the laws of the State of
Florida, with its principal place of business at the City of
Miami, State of Florida, has named HECTOR MONNIER
located at 8730 SW 133 AVE. Rd. 12410, Miami Florida,
as its Agent to accept service of process within Florida.

[Signature]
CORPORATE OFFICER

TITLE DIRECTOR-PRES.

DATE 01-31-97

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER
AND COMPLETE PERFORMANCE OF MY DUTIES.

[Signature]
RESIDENT AGENT

DATE 01-31-97