# PMO0000396

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

SUBJECT:	1 reken	r ruc		_
	(Proposed corp.	orate name - must include suffi 1.	x) 200212836 -03/31/9701061 ****122.50 ***	; <b>1</b> —— 7001 •*122, 50
Enclosed is an original a	nd one(1) copy of the arti	cles of incorporation and a	a check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	<u> </u>
FROM:	Name (Prin	nied or typed)	TALLAI	9 第3
<u> </u>	252 NW 19	dress	Ray of	R 31 PH
	Hami F	1ate & Zip	STATE A	声
	305 - 8 Daytime Tel	29 -9373 ephone number	البار البارا	1

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.

ARTICLE I NAME

The name of the corporation shall be:

TREKENZ INC.

STILLED 1.45

ARTICLE II PRINCIPAL OFFICE

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

H800 SW 64th Ave # 106 Davie FL. 33314

ARTICLE III SHARES

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

1 million

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Suz AN Brandon 8475 Sw 137 th Ame Hirum Fl. 33183

#### 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):

CARI THAME
8252 NW 199 TR
HIAMI FL. 33015

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29 day of Harch , 19 97.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

### 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.

1. The name of the corporation is 1 rekenz Inc	
2. The name and address of the registered agent and office is:	
2. The name and address of the registered agent and office is.	1,n ea
Suzan Brandon (NAME)	FIL ALLANA
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	RY OF STI
Hiam FL 33183	ATE 45

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 of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature) 3/7/97
(Signature) (Dixte)