# P972000032206

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

SUBJECT: Mi	ETRIC COPP	rate name - must include suff	īvl	
	(Hoposca Corpor	iate name - must menude sur	<i>,</i>	
		70	0002132217 -04/03/9701025 ******78.75 *****	-009
Enclosed is an original a	and one(1) copy of the article	es of incorporation and 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 COPY REQUIRED		
FROM: Pario Ventoso Name (Printed or typed)				
849	<del></del>	#614		
	Addition of the Addition of th	33193 10&Zip	97 APR -9 PH 1: SECRETARY OF STALLAHASSEE, FLOT	1

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

·ne 4/9/97



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 4, 1997

PABLO VENTOSO 8480 SW 156 PL #614 MIAMI, FL 33193

SUBJECT: METRIC CORP. Ref. Number: W97000007847

We have received your document for METRIC CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6067.

Neysa Culligan Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 497A00016989

#### 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:

METEIC CWF, CORP. -

ARTICLE II PRINCIPAL OFFICE

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

8480 SW 150 PL #614 MAMI, FL 33193 - 97 APR -9 PH 1: 5
SECRETAR TOF STATE
TALLAHASSEE FLORID

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PABLO VENTOSO 8480 SW 156 PL #G14 MIAMI, FL 33193

### 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):

PABIO VENTOSO BYBO SW 150 R # 614 MIAMI, FL 33193

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

01 day of HOL , 19 97.

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

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 METRIC CWF	CORP
2. The name and address of the registered agent and office is:  PARIO VENTOSO (NAME)  OP. O. Box or Mail Drop Box NOT ACCEPTAB  MAMI F. 33193  (CITY/STATE/ZIP)	97 APR -9 PM 1: 56  SECRETAIN OF STATE TALLAHASSEE, FLORIDA

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.

(\$IGNATURE) (DATE)