D9100041542 TRANSMITTAL LETTER

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



SUBJECT: <u>NKA</u>	RTZMARK (2 M , AM) (Proposed corpore	NC ate name - must include suff	ix)
		700	002176397- -05/13/97010440 *****78.75 ******7
Enclosed is an original an	d one(1) copy of the articles	of incorporation and a c	heck 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
FROM: <u>VAR</u>	TIN KARTZMAKK Name (Printed	d or typed)	
_99	35 NW 46 ST Addre	APT 306	
<u></u>	AMI, FL 3317 City, State	8 2 & Zip	

(305) 819 - 32-42 Daytime Telephone number





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:

MKARTZMARKCHIAMI INC.

ARTICLE II PRINCIPAL OFFICE

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

9935 NW 4655 APT 306 MIAMI, FL 33178 (305) 819-3242

ARTICLE III SHARES

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

500

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

MARTIN JKARTZMARK

9935 NW 465T ADT 300

MIAMI, FL 33178

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):

MARTIN J KARTZMARK 9935 NW 46ST APT 306 MIAMI, FL 33178

The undersign	ed incorporator(s) has(have) executed these Articles of Incorporation this
<i>O1</i> day	of <u>MAY</u> , 19 <u>97</u> .
(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.

ì.	The name of the corporation is MKARTZMRKQ MIANI INC.
2.	The name and address of the registered agent and office is:
	MARTIN J KARTZMAR((NAME)
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)
	MIAMI, FL 33178 (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 of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature) (Date)