## P970000558/9

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

SUBJECT:	M.A.R., Inc. (Proposed co.	rporate name - must include	e suffix)	_
		ε	300002215 -06/23/97 ****131.25	19782 01116-003 ****131.25
Enclosed is an original	and one(1) copy of the articles	of incorporation and a c	check for :	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy  ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate  PPY REQUIRED	
FROM:	Ileana Tojeiro Name (Pr	rinted or typed)	<del></del>	
	12004 S.W. 117th  A Miami, Fl. 3318	Terr. Address	SEUNT ANNS A E FLORID	FILED 97 JUN 23 PH 3: 37
	(305) 274-1196	elephone number	Dr.	7

AL WUN 2 5 1997

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

FILED

## ARTICLES OF INCORPORATION

97 JUN 23 PM 3: 37

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECH TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

M.A.R., Inc.

ARTICLE II PRINCIPAL OFFICE

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

12004 S.W. 117th Terr.

Miami, Fl. 33186

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 Florida street address of the initial registered agent are:

Ileana Tojeiro

12004 S.W. 117th Terr.

Miami, Fl. 33186

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Ileana Tojeiro

12004 S.W. 117th Terr.

Miami, Fl. 33186

Signature/Incorporator

Date

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

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/Registered Agent

Date