P97000100429

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

200002355042--7 -11/24/97--01027--014 *****131.25 *****131.25

SUBJECT: MAINZ-KASTEL INC.

(Proposed corporate name - must include suffix)

MAINZ-KASTEL is a town bocated in

Germany and there is no translation

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75

Filing Fee

& Certificate

□\$122.50

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Norberto & Christina Ortiz
Name (Printed or typed)

P.O. Box 210052
Address

Royal Palm Beach, FL. 33421

(561) 791-9177 Daytime Telephone number

97 NOV 24 AN 8: 2
SECULIAN SEE FINAN

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

ARTICLES OF INCORPORATION

97 NOV 24 AM 8: 20

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

SECRE, ARY OF STATE TALLAHASSEE, FLORIDA

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The name of the corporation shall be:

MAINZ-KASTEL INC.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 210052 Royal Palm Beach FL 33421

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Norberto Ortiz 150 ALCAZAR STr.

Royal Palm Beach FL 33411

ARTICLE V INCORPORATOR

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

Christina Octiz

150 ALCAZAY Str. Rayal Palm Beach

(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

21 NOV 9