200059100 E USE ONLY ZARUS CORPORATE FILING SERVICE, INC. (Requestor's Name) 002579025---07/02/98--01048--015 3320 S.W. 87th AVENUE (Address) ****122.50 ****122.50 MIAMI, FLORIDA (305)552-5973 (Phone #) (City, State, Zip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Pick up time 2100 Certified Copy Walk in Certificate of Status Photocopy Mail out Will wait AMENDMENTS NEW FILINGS DIVISION OF CORPORK Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS **OUALIFICATION** Annual-Report oreign Fictitious Name _imited Partnership Name Reservation Reinstatement **V**rademark Other: Examiner's Initials CR2E031(9/92)



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 2, 1998

LAZARUS

MIAMI, FL

SUBJECT: E-GROUP CORPORATION

Ref. Number: W98000015207

We have received your document for E-GROUP CORPORATION. However, the document has not been filed and is being returned for the following:

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 a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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 (850) 487-6934.

Letter Number: 698A00035949

Loria Poole Corporate Specialist

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	SE ORE TA	98
The name of the corporation shall be: MICROSHOP-EGROUP CORPORATION	RY OF STATE	PH 2: 58

ARTICLE II PRINCIPAL OFFICE

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

۲,

ARTICLE III SHARES

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

500 shares of \$1.00 each share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HUGO QUINONES 8432 NW 66th STREET MIAMI FL 33166

ARTICLE V INCORPORATOR(S)

	nd street address(es) of the incorporator(s) to these Articles of		
Incorporation is(are):		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
MARIO AVILES	EVA DE AVILES	HUGD OUINONES	
• • • •		01/20 111 11 57	
8432 NW 66 ST	8432 NW 665T	8432 NW 66 ST	
0472 NW 00 0.		MIAHI FL 33166	
WIANI FL 33166	WIAMI FL 33166	MIAMI PL 00.00	

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

MIAHI FL 33166 , HIAMI FL 33166

- · MARIO AUILES / PRESIDENT 8432 NW 66 ST MIAMI FL 33166
- · EVA DE AVILÉS/VICE PRESIDENT 8432" NW 66 ST MIAHI FL 33166
- · HUGO QUINONES / DIRECTOR 8432 NW 66 ST MIAHI FL 32/66
- ALVARO LOZANO / SECRETARY 8432 NW 66 ST FC 33166 MIAHI

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this _____ day of ____\ucupeccepts

Signature

Signature

HUGO QVINONE

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

The name of the corporation is: MICROSHOP-EGROUP CORPORATION	V
he name and address of the registered a	gent and office is:
HUGO QUINONE	۲
(NAME)	
8432 NW 66 th	STREET
(P.O. BOX <u>NOT</u> ACCE	
MIAMI FL 331	66
(CITY/STATE/ZI	

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

98 JUL -2 PH 2: 58

SECRETARY OF STATE

7/1/98

DATE

REGISTERED AGENT FILING FEE: \$35.00