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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

300002624429-4

-08/25/98--01040--023

****122.50 ****122.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. TRIPLE M PURCHASING, MANAGEMENT
 (Corporation Name) (Document #)

2. AND CONSULTANTS INC.
 (Corporation Name) (Document #)

3. _____
 (Corporation Name) (Document #)

4. _____
 (Corporation Name) (Document #)

- Walk in Pick up time 2:00 Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

98 AUG 25 PM 1:12
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

FILED

98 AUG 25 AM 10:59
 DEPARTMENT OF STATE
 DIVISION OF CORPORATE AFFAIRS
 TALLAHASSEE FLORIDA

RECEIVED

Handwritten signature/initials

Examiner's Initials

ARTICLES OF INCORPORATION

98 AUG 25 PM 1:1
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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:

TRIPLE "M", Purchasing, MANAGEMENT AND
CONSULTANTS INC.

ARTICLE II PRINCIPAL OFFICE

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

9725 NW. 52ND STREET, UNIT 43-118
Miami FL. 33178
Phone: (305) 639-2538

ARTICLE III SHARES

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

1000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Julio Moreno
9805 NW., 52ND STREET, UNIT 311
Miami, FL. 33178.-
Phone: (305) 406.2578

ARTICLE V INCORPORATOR(S)

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

MARIANO MARQUEZ:

9725 NW, 52 ST, Unit. #43-118, Miami FL 33178
Phone: (305) 639-2538

Julio Moreno:

9805 NW. 52 ST, Unit 311, Miami - FL 33178
Phone (305) 406-2578.

ARTICLE VI DIRECTOR(S)

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

President: MARIANO MARQUEZ

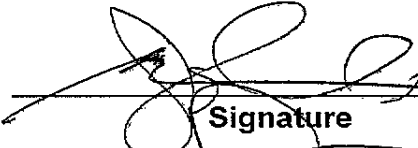
9725 NW. 52 ST. Unit. #43-118, Miami FL 33178

Vice-President:

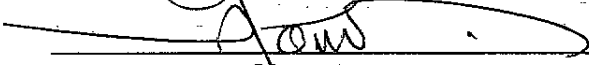
Julio Moreno

9805 NW. 52 ST Unit 311, Miami, FL. 33178

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 24 day of AUGUST, 1998.



Signature



Signature

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.

1. The name of the corporation is: Triple "M" Purchasing Management and Consultants, Inc.

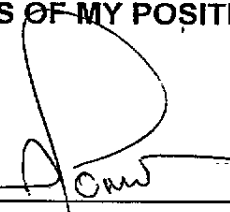
2. The name and address of the registered agent and office is:

Julio Morano
(NAME)

9805 NW. 52ST, Unit. 311, Miami FL, 33178
(P.O. 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 8/24/98

98 AUG 25 PM 1:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

REGISTERED AGENT FILING FEE: \$35.00