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CORPORATION NAME(s) & DOCUMENT NU	MRED(S) (if mount)
MANAGEMENT	·
1. FAROJENTERPRISE	<i>,</i> —
2. Translation: CINTHOUSE, LD	(Document #)
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
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(Corporation Name)	(Document #)
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CR2E031(9/92)	Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

September 4, 1998

LAZARUS

MIAMI, FL

SUBJECT: FARO ENTERPRISES, INC.

Ref. Number: W98000020129

We have received your document for FARO ENTERPRISES, INC.. 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.

Loria Poole Corporate Specialist

Letter Number: 398A00045269

## **ARTICLES OF INCORPORATION**

98 SEP -4 PM 4: SECRETARY OF STANDERS FLOWER THREE SECRETARY OF STANDERS THREE SECRETA

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The undersigned incorporator(s), for the purpose of forming a corporation and decite by the Florida Business Corporation Act, hereby adopt(s) the following Articles of the orporation.

#### ARTICLE | NAME

The name of the corporation shall be: FARO MANAGEMENT ENTERPRISES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

## ARTICLE III SHARES

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

10.000 (TEN THOUSAND).

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LILIANA. FIAND ORTIZ 1935 MADEIRA DR. WESTON, FL 33327

#### ARTICLE V INCORPORATOR(S)

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

LILIANA FIAND ORTIZ

1935 MADEIRA Dr
WESTON, FZ 33327

- ROBERTO ORTIZ

1935 MADEIRA DR.
Weston, FZ ARTICLE VI DIRECTOR(S)
33327

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

ROBERTO DETIZ (P) 1935 MADETRA DR. WESTON, FL 33327

LILIANA FIAND ORTIZ (VP) 1935 MADEIRA DR. WESTON, FL 33327

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  $\underline{1}$  day of  $\underline{SEPTEMBER}$ ,  $\underline{1998}$ .

I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature

(VP/R-

( . . . , . .

P-4 P ETARY ( HASSEE

Signature

STATE LORIDA

Articles of Incorporation Filing Fee - \$35