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10/01/98

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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DIVISION OF CORPORATIONS TO:

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: MARYOLME USA, INC. AUDIT NUMBER..... H98000018277

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

PAGES....

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

ARTICLES OF INCORPORATION OF MARYOLME USA, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: MARYOLME USA, INC.

The principal place of business of this corporation shall be: 9601 SW 142 AVE SUITE 1209 HIAMI PLORIDA 33186

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is Five Hundred (500) shares of One Dollar (\$1.00) per value common stock, which shall be designated "Common Shares".

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successors(s) is (are) elected, is(are):

MANUEL PINTO - PRESIDENT 9601 SW 142 AVE SUITE 1209 MIAMI PLORIDA 33186

Prepared by: LEGAL SERVICE 2000 7295 W FLAGLER ST MIAMI FL 33144 (305) 260-0201

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DINISION OF CORPORALIONS

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

MANUEL PINTO, PRESIDENT 9601 SW 142 AVE SUITE 1209 MIAMI PLORIDA 33186

IN WITNE executed lay of _	these Articl October	the under es of incor 1998	poration t	orporator(s) his 01	has(have)
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			Signator	ske Loy Ench	rperator(s)
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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: MARYOLME USA, INC. 2. The name and address of the remanuel PINTO, PRESIDENT 9601 SW 142 AVE SUITE 1209	
(P.O. BOX NO	r ACCEPTABLE)
MIAMI FLORIDA 33186	
.	IGNATURE PRESIDENT 98 NARY
•	2 PATE 10/01/98 2 56 STORY
t	PATE @ PE
STATED CORPORATION, AT THE PLACE I HEREBY AGREE TO ACT IN THI TO COMPLY WITH THE PROVISIONS PROPER AND COMPLETE PERFORMANCE DUTIES AND OBLIGATIONS OF SECTION	ERVICE OF PROCESS FOR THE ABOVE THE DESIGNATED IN THIS CERTIFICATE, TO CAPACITY, AND I FURTHER AGREE OF ALL STATUTES RELATIVE TO THE THE OF MY DUTIES, AND I ACCEPT THE ON 607.325, FLORIDA STATUTES. SIGNATURE DATE 10/01/98