8000107116

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

Exoticnet, Inc.
(Proposed corporate name - must include suffix) **SUBJECT:**

Enclosed is an original	nd one(1) copy of the	e articles of incorpo	ration and a check for:
		,	

\$70.00

□ \$78.75...

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

Evan M. Blair

Name (Printed or typed)

965 NE 72dd Street

Miami, Florida

City, State & Zip

(305)754-0273

Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Exotic net, Inc.

ARTICLE II PRINCIPAL OFFICE

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

965 NE 72 57

965 NE 72nd St Miami, Florida 33138

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Dr. Evan M. Blair 965 NE Tad Street Miami, Florida 33138

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Dr. Evan m. Blair 965 NE Tary St Miami, Florida 33138

Dr. Evan M. Blain

12-19-98

Signature/Incorporator

Date

(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

Dr. Gean M. Blair

12-19-98

Signature/Registered Agent

Date