

P99000023426

TRANSMITTAL LETTER

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

SUBJECT: EVODIO ENTERPRISES, INC.

500002798225--0
-03/08/99--01132--007
*****87.50 *****87.50

Enclosed please find an original and two (2) copies of the articles of incorporation and a check for:

\$87.50

This payment includes the Filing Fee, Certified Copy, and Certificate of Status.

EFFECTIVE DATE
3-1-99

FROM:

Jerry Llevada
P.O. Box 440195
Miami, Florida 33144-0195

Daytime Telephone Number:

305-962-7961

FILED
99 MAR -8 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Bmc
3/12/99

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:

EVODIO ENTERPRISES, INC.

ARTICLE II (PRINCIPAL ADDRESS)

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

P.O. BOX 440195, MIAMI, FL 33144-0195

ARTICLE III (SHARES)

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

—100—

ARTICLE IV (INITIAL REGISTERED AGENT AND STREET ADDRESS)

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

JERRY LLEVADA
1375 S.W. 47TH AVENUE, MIAMI, FL 33134

EFFECTIVE DATE

3-1-99

ARTICLE V (INCORPORATOR)


The name and address of the incorporator to these Articles of Incorporation are:

JERRY LLEVADA
P.O. BOX 440195, MIAMI, FL 33144-0195

ARTICLE VI (EFFECTIVE DATE)

The effective date of the corporation shall be:

MARCH 1, 1999



Jerry Llevada, Incorporator

March 1, 1999

Date

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



Jerry Llevada, Registered Agent

March 1, 1999

Date

FILED
99 MAR - 8 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA