

P99000226188

TRANSMITTAL LETTER

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 MAR 16 AM 10:08

SUBJECT: MLA. VIRTUAL SEX INC  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

☐ \$70.00 ☒ \$78.75 ☐ \$122.50 ☐ \$131.25

200002807682--4  
-03/16/99--01058--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

FROM:

COMPLETE TAX SYSTEMS INC

Name (printed or typed)

18800 NW 2ND AVENUE SUITE 216

Address

MIAMI FL 33169

City, State & Zip

305-655-3555

Daytime Telephone number

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

3-23  
WLS

# ARTICLES OF INCORPORATION OF

M. I. A. VIRTUAL SEX INC

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*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:

M.I. A. VIRTUAL SEX INC

## ARTICLE II PRINCIPAL OFFICE

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

2941 NW 162ND STREET  
OPA LOCKA FL 33054

## ARTICLE III SHARES

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

ONE THOUSAND SHARES OF COMMON STOCK AT ONE PER SHARE.

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

COMPLETE TAX SYSTEMS INC  
18800 NW 2ND AVENUE SUITE 216  
MIAMI FL 33169

**ARTICLE V INCORPORATOR(S)**

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

ROBERT ALEXANDER  
2941 NW 162ND STREET  
OPA LOCKA FL 33054

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

8TH day of MARCH, 1999.

✓ Robert Alexander  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Articles of Incorporation  
Filing Fee - \$35**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 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:

M. T. A. Virtual Sex Inc.

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

COMPLETE TAX SYSTEMS INC

(Name)

18800 NW 2ND AVENUE SUITE 216

(P.O. Box not acceptable)

MIAMI FL 33169

(City/State/Zip)

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*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.*

Thomasine Whitaker  
(Signature) VICE PRESIDENT

3/8/99