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

*****87.50

ON LINE TRANSFER COMPANY **SUBJECT:** (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

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

FROM:	RICARDO EDOUARD		
	Name (Printed or typed)		-
	14180 S.W 84th STREET		_
	Address		
	MIAMI, FLORIDA 33183		
	City, State & Zip	**************************************	
	305-871-4884	-	
	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: ON LINE TRANSFER COMPANY		SECRETARY OF COR
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 6405 N.W 36th STREET UNIT 112 MIAMI, FL 33166		AN 9:07
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding 100 SHARES	at any one	e time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADD The name and Florida street address of the initial registered agent are: RICARDO EDOUARD 14180 S.W 84th STREET MIAMI, FL 33183	DRESS — — — — —	· • • ·
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:		
RICARDO EDOUARD 14180 S.W. 84th STREET MIAMI, FL ##!*# 33183		,

(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

Signature/Registered Agent

021 - 01 - 99 Date

Date