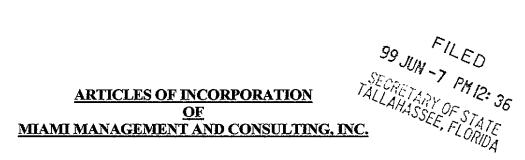
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

			2000028 -06/07/ ******7	396552 9901111008 8.75 *****78.75
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:	_
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Dora MA+ Name (Pr	14- inted or typed)	·	.
	10721 SW	29 ⁹⁴ S. J.	TALLA	NNF 66
	Mi Ami Kity,	EL <u>33165</u> State & Zip	HASSEE, F	FILED N-7 PHI2:
	305-480- Daytime Te	9637 elephone number	LORIDA	77. 36 77. 36

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



<u>ARTICLE I</u>

The name of this corporation shall be:

MIAMI MANAGEMENT AND CONSULTING, INC.

ARTICLE II

The general nature of business to be carried on by this corporation is:

- a. To enter into any and all contracts with any person, firm, corporation and/or association.
- b. To engage in the transaction of any and all lawful business or businesses for which corporations may be incorporated under the General Corporation Act of the State of Florida.

ARTICLE III

The maximum number of shares of stock that this corporation is authorized to issue is 100 shares.

ARTICLE IV

The shareholders of this corporation shall have preemptive right to acquire unissued or treasury shares of the corporation, or securities of the corporation convertible into or carrying a right to subscribe to or acquire shares.

<u>ARTICLE V</u>

This corporation is to have perpetual existence.

ARTICLE VI

The principal office of this corporation shall be located at 11470 N.W. 4th Lane Miami, Florida 33172, with the corporation retaining the power of moving its office to any other address in the State of Florida, as may, from time to time, and at any time, be determined by its Board of Directors, with branch offices in such other cities, counties, states and countries as may from time to time, and at any time, be determined by its Board of Directors.

ARTICLE VII

The initial registered office of this corporation shall be 11470 N.W. 4th Lane Miami, Florida 33172.

The initial Registered Agent at such address shall be **DORA MATA**.

ARTICLE VIII

This corporation shall, at all times, have at least (2) Directors who shall conduct the business of the corporation as a Board of Directors. The stockholders of the corporation may, from time to time, and at any time, increase or decrease the size of the Board of Directors of the corporation, provided the corporation have at least (2) Directors.

ARTICLE IX

The name and address of the members of the initial Board of Directors of the corporation

who shall hold office until the first annual meeting of shareholders and until their successor is elected and qualified, or until their earlier removal from office, resignation or death, are:

Miguel Manresa 11470 N.W. 4th Lane Miami, Florida 33172

Dora Mata 11470 N.W. 4th Lane Miami, Florida 33172

ARTICLE X

The name and address of the incorporator is:

Dora Mata 11470 N.W. 4th Lane Miami, Florida 33172

ARTICLE XI

The by-laws of this corporation may be created, amended, changed or replaced by either the stockholders or the Directors of the corporation at any duly scheduled Special Meeting called for that purpose.

ARTICLE XII

This corporation shall indemnify any officer or Director, or any former officer or Director to the full extent permitted by law.

The undersigned does hereby subscribe, acknowledge and file these Articles of

Incorporation, hereby certifying that the facts contained herein are true and correct, and accordingly hereto set my hand and seal this ______ day of June 1999.

DORA MATA (SEAL)

STATE OF FLORIDA

SS:

COUNTY OF DADE

The foregoing instrument was acknowledged before me this _____ day of June 1999 by **DORA MATA**, the person who executed the foregoing Articles of Incorporation, and who is personally known to me (or has produced a driver's license as identification) and who did take an oath and she acknowledged before me that she executed the same freely and voluntarily for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal of office in the State and County last aforesaid, this __3_L_ day of June 1999.

NOTARY PUBLIC, State of Florida at Large

My Commission Expires:

Hilda Villanueva

Photograp Public, State of Florida

Commission No. CC 510672

Popen My Commission Expires 11/20/99

1-800-3-NOTARY - Fla. Notary Service & Bonding Co.

Mulling Co.

ACCEPTANCE OF REGISTERED AGENT

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.

DORA MATA

DATE

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SECRETARY OF STATI