## 090000013/36

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

\$70.00

Filing Fee

300002956683---0 -08/11/99--01028--010 \*\*\*\*122.50 \*\*\*\*\*78.75

**□** \$131.25

Filing Fee,

SUBJECT:	M. A. DREE REKURDS INC.		
	(Proposed corporate name - must include suffix)		

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

Filing Fee

	& Certificate	& Cerunier Copy	& Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	MARCUS TO	URNER inted or typed)		
	18125 NW	25 CT ddress	TANK CARE	
	MIAMI, FL 33056  City, State & Zip			
		State & Zip	FLOW	SE 15
		-4383	·	5m
Daytime Telephone number				

Filing Fee

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: M. A. DREE REKURDS INC.						
ARTICLE II PRINCIPAL OFFICE						
The principal place of business and mailing address of this corporation shall be:						
17038 W. DIXIE HWY PMB 236						
N. MIAMI BEACH, FL 33160.						
ARTICLE III SHARES						
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:						
100 shares						
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:						
MARCUS TURNER 17038 W DIXIEHWY N. MIAMIBEACH, HZ						
ARTICLE V INCORPORATOR						
The name and address of the incorporator to these Articles of Incorporation are:						
MARCUS TURNER 18125 NW 25CT MIAMI, FL 33056						
Marcus Sueves B/9/99  (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	he above stated corporation at the place designated in this
certificate. I hereby accept the appointment as registered agent and agree to	o act in this capacity. I further agree to comply with the
provisions of all statutes relating to the proper and complete performance	e of my duties, and I am familiar with and accept the
obligations of my position as registered agent	/ /
obligations of my position as registered agent	8/9/99
11 RULLANIAN	

Signature/Registered Agent

Date