

Charter Number Only

VALIDATION ONLY

8/6/99

David Gonzalez

Requestor's Name

1900 SW 23 St.

Address

MIAMI FL 33145

City

State

ZIP

Phone

854-0000

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*****78.75 *****78.75

CORPORATION(S) NAME

MIAMI BUSINESSCARDS - COM, CORP

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED



Empire Toll Free: 1-800-432-3028

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> NonProfit	<input type="checkbox"/> Foreign	<input type="checkbox"/> Mark
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Dissolution	<input type="checkbox"/> Other
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Change of Registered Agent
<input type="checkbox"/> Reservation	<input type="checkbox"/> Photo Copies	<input type="checkbox"/> Certificate Under Seal
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Will Wait	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input checked="" type="checkbox"/> Pick Up	<input type="checkbox"/> Mail Out

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DIVISION OF CORPORATE
TALLAHASSEE FLORIDA

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**ARTICLES OF INCORPORATION
OF
MIAMIBUSINESSCARDS.COM CORP.**

These Articles are in compliance with Chapter 607, F.S.

ARTICLE I

The name of this corporation shall be:

MIAMIBUSINESSCARDS.COM CORP.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, State of Florida, and shall have perpetual existence.

ARTICLE III

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

1900 S.W. 23RD STREET
MIAMI, FLORIDA 33145

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The number of shares which this corporation shall have authority to issue is \$100.00 shares, having an individual par value of One Dollar \$1.00 per share.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be:

DAVID GONZALEZ
1900 S.W. 23rd Street
Miami, Florida 33145

Prepared by: David Gonzalez, In Proper Person
1900 S.W. 23rd Street, Miami, Florida 33145
Tel: 305 854-0006

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ARTICLE VII

The initial board of Directors shall consist of a total of person(s) and the name and address of the person(s) who are to serve as an initial director(s):

DAVID GONZALEZ, PRESIDENT
1900 S.W. 23RD STREET
MIAMI, FLORIDA 33145

JUAN M. CAPO, VICE PRESIDENT
1001 S.W. 12TH COURT
MIAMI, FLORIDA

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

DAVID GONZALEZ
1900 S.W. 23RD STREET
MIAMI, FLORIDA 33145

The undersigned has executed these Articles of Incorporation this 26th day of August, 1999.



DAVID GONZALEZ, INCORPORATOR

**CERTIFICATE OF DISIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, 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.

First that MIAMIBUSINESSCARDS.COM CORP. desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, has named DAVID GONZALEZ, located at 1900 S.W. 23rd Street, City of Miami, County of Miami Dade, State of Florida, as its agent to accept service of process within this state.

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



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