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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

MAX TRADING CORPORATION

Certificate of Status	0
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Estimated Charge	\$78.75

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**CERTIFICATE OF INCORPORATION
OF
MAX TRADING CORPORATION**

I, the undersigned, in order to form a corporation under a pursuant to the provisions of the laws of the State of Florida for the purposes hereafter set forth, hereby subscribe to this Certificate of Incorporation.

**ARTICLE I
NAME OF CORPORATION**

The name of the proposed corporation shall be:

MAX TRADING CORPORATION

**ARTICLE II
NATURE OF BUSINESS**

The general nature of the business to be transacted by this corporation shall be any activity permitted under the laws of the United State of Florida.

**ARTICLE III
CAPITAL STOCK**

The maximum number of shares of stock that the corporation is authorized to have outstanding at any one time is 500 shares at no par value.

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**ARTICLE IV
TERM OF EXISTANCE**

This corporation is to exist perpetually.

**ARTICLE V
PRINCIPAL PLACE OF BUSINESS**

The initial street address in this state of the principal office of this corporation is 10540 NW 26TH Street Suite 103 Miami Fl 33172. The board of directors may, from time to time, move the principal office to any other address in Florida.

**ARTICLE VI
DIRECTORS**

This corporation shall have initially two (2) directors. The number of director (s) may increased or diminished from time to time by laws adopted by the stockholders.

**ARTICLE VII
INITIAL DIRECTORS**

The name and address of the member(s) of the first board of director(s) is:

President	GISELLE TEFT
Vice-President	12481 SW 190 Street Miami Fl. 33177

Treasurer	DAVID B. RANGEL
Secretary	12481 SW 190 Street Miami Fl. 33177

**ARTICLE VIII
INCORPORATOR**

The name and address of the person signing these Articles of Incorporation as the incorporator is DAVID B. RANGEL 12481 SW 190 Street Miami Fl. 33177

**ARTICLE IX
REGISTERED AGENT**

The initial designation of the registered office of this corporation shall be: 10540 NW 26TH Street Suite 103 Miami Fl 33172

And the registered agent shall be: GISELLE TEFT


Pursuant to Florida Statutes Section 607.164, having been named to accept process for the above stated corporation, at the place designed in these Articles of Incorporation, I hereby Accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By: Giselle R. Teft
Registered Agent

**ARTICLE X
AMENDMENT**

This corporation reserves the right to amend any provision of this Articles of Incorporation in the manner provided by law. Any rights conferred upon shareholders shall be subject to this reservation.

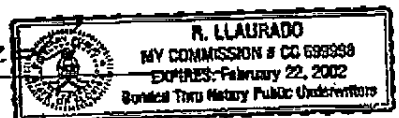
IN WITNESS WHEREOF, The undersigned has execute, acknowledged and filed the foregoing Articles of Incorporation under that laws of the State of Florida this September 1st, 1999


Incorporator

(STATE OF FLORIDA)
(COUNTRY OF DADE)

BEFORE ME, A Notary Public, personally appeared DAVID B RANGEL or herein, who, executed the foregoing Articles of incorporation and stated on oath that the contents thereof are true and correct, this September 1st, 1999.

My commission expires: 

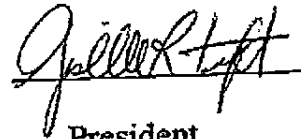


**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of section 607.0501, Florida Statutes, the Undersigned Corporation organized under the laws of the State of Florida submits the following statement in designation the registered office/registered agent, in the state of Florida.

1. The name and address of the registered agent and office is: GISELLE TEFT 10540 NW 26TH Street Suite 103 Miami Fl 33172

SIGNATURE



President

DATE: September 1st, 1999

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 APPLY WITH THE PROVISION OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE: September 1st, 1999

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TALLAHASSEE, FLORIDA

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