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

900003001969

Rad	Box	Direc	f Inc
Dau	DUX	Duec	LHW.

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

\$122.50

\$131.25

Filing Fee

Filing Fee & Certificate

Filing Fee & Certified Copy Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Name (Printed or typed)

Charles Van Horn

Address

3050 Biscayne Blvd., Suite 1006

City, State & Zip

Miami, Florida 33137

Daytime Telephone number

305-573-0135

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 ! NAME

The name of the corporation shall be:

Bad Box Direct Inc.

ARTICLE II PRINCIPAL OFFICE

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

3050 Biscayne Blvd., Suite 1006 Miami, FL 33137

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Charles Van Horn 3050 Biscayne Blvd., Suite 1006 Miami, FL 33137 99 SEP 30 PM 4: 33
SECRETARY OF STATE
ANASSEE, FLORIDA

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Charles Van Horn 3050 Biscayne Blvd., Suite 1006 Miami, FL 33137

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 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

79 Date