Department of State Division of Corporations

A. Howell OCT 2 1 1999

P. O. Box 6327 Tallahassee, FL 32314	-10/18/3901091010 *****78.75 ******78.75
SUBJECT: MTS MANAG (Proposed corpo	EMENT CORP.  orate name - must include suffix)
	· · · · · · · · · · · · · · · · · · ·
Enclosed is an original and one(1) copy of the article	es of incorporation and a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	S78.75 S87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Michael S	Printed or typed)
	1st Terrace Address
Pompano P	Beach, Florida 33060
(954) 784 - Daytime	Telephone number
	18 AM X ARY OF STA SSEE, FLOR
NOTE: Please provide the GAVE HORIZATION BY PHONE TO	original and one copy of the articles.

The undersigned incorporator, for the purpos Business Corporation Act, hereby adopts the	se of forming a corporation under the following Articles of Incorporation.	Florida 1999 OCT 18 AM IC SECRETARY OF ST TALLAHASSEE, FLO	O: 00 TATE
ARTICLE I NAME  The name of the corporation shall be:	MTS MANAGEM		 
ARTICLE II PRINCIPAL OFF The principal place of business and mailing SWANNY'S TIKI BY J201 N. Federal Fort Lauderdale, ARTICLE III SHARES The number of shares of stock that this con	ng address of this corporation shall  AR  Hwy  FL 33305 - 2530	6	<u></u>
ARTICLE IV INITIAL REGIST The name and Florida street address of the		EET ADDRESS	
Michael Swan 1180 Sw 1st Terrace Pompano Beach, FL 33 ARTICLE V INCORPORATOR The name and address of the incorporate Michael Swan 1180 Sw 1st Terrace Pompano Beach, FL 33	3060 Report to these Articles of Incorporation	on are:	

(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

Signature/Incorporator

TICLES OF INCORPORATION