# V100921677

#### TRANSMITTAL LETTER

800003016928--0 -10/18/99--01085--014 \*\*\*\*122.50 \*\*\*\*\*78.75

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

Alain Marescal Import, Inc. \_\_\_\_\_\_\_\_ SUBJECT: (Proposed corporate name) Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$\_ Alain Marescal Import, Inc. FROM: Name (printed or typed) 3900 NE 1st Avenue Address Miami, Fl. 33137 City, State\_& Zip Code

Note: Please provide the original and one copy of the Articles.

(954) 430-7335

Telephone Number

FILED
1999 OCT 18 AM II: 35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLES OF INCORPORATION

The undersigned incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall\_be:

Alain Marescal Import, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

3900 NE 1st Avenue 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:

100 Shares @ \$1.00 par value

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Alain Marescal 3900 NE 1st Avenue Miami, Fl. 33137

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Alain Marescal 3900 NE 1st Avenue Miami, Fl. 33137

President/Secretary

The undersigned incorp			cles
of Incorporation this	oday of	<u>19 99</u>	
-	Signature		

Signature

## FILED

1999 OCT 18 AM 11: 35

SECRETARY OF STATE TALLAHASSEE, FLORIDA

# CERTIFICATE OF DESIGNATION OF 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.

1.	The	name	of t	he c	orpor	ation	is_	Alain Marescal Import, Inc.
							_	3900 NE 1st Avenue Miami, Fl. 33137
2.	The	name	and a	addr	ess c	of the	reg	istered agent and office is:
								Alain Marescal
							_	(Name)
								3900 NE 1st Avenue
						(P.	D. Bo	x or Mail Drop NOT acceptable)
								Miami, Fl. 33137
								( City/State/Zip)
proce this agent with compl	ess f cert and the lete	or th ifica agre prov perfo	e abo ate, e to ision mance	ve s I he act us of	tated ereby in th f all my du	l corpo accer nis ca stat sties,	oration the pacion of the paci	nt and to accept service of on at the place designated in he appointment as registered by. I further agree to comply relating to the proper and I am familiar with and accept sistered agent.
<del></del>	<u> </u>	SIGNA	TÛRE				_	10/10/99 (DATE)

DIVISION OF CORPORATIONS, P.O.BOX 6327, TALLAHASSEE, FL 23214