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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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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 : (305)716-0346 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

COMA 2,000, INC.

Certificate of Status	O
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

OF COMA 2,000 , INC.

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

ARTICLE I NAME

The Name of the corporation shall be:

COMA 2,000 , INC.

The principal place of business of this corporation shall be:

1120 NW 94 WAY PLANTATION, FL 33322

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

Aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any time is one hundred shares (100) at \$5.00 par value>

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE V OFFICERS/DIRECTORS

The name(s) and street address(es) of the initial officer(s) and directors(s), if any, who shall hold office the first year of the corporationAs existence or until their successor(s) is (are) elected is (are):

DIRECTOR/PRESIDENT RUTH DOMINGUEZ

1120 NW 94 WAY

PLANTATION, FL 33322

DIRECTOR/SECRETARY GABRIELA GARCIA

1120 NW 94 WAY

PLANTATION, FL 33322

ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (are):

RUTH DOMINGUEZ 1120 NW 94 WAY PLANTATION, FL 33322

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed the Articles of Incorporation this 3²⁰ day of December, 1999

Signature of incorporator(s)

ruth-domincubz

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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.

The name of the corporation:

COMA 2,000 , INC.

The name and address of the registered agent and office is: RUTH DOMINGUEZ 1120 NW 94 WAY PLANTATION, FL 33322

SIGNATURE:	(Comoone
TITLE:	President
DATE:	12-4-99

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

DATE: 19-4-99

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