

**PO100089127**

OFFICE USE ONLY (Document #)

**EXPRESS CORPORATE FILING SERVICE INC.**

(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101

(Address)

CORAL GABLES, FL 33134 305-444-4994

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. ABC SUNSHINE TRADING CORP. (Corporation Name) 600004582896-3 (Document #)

2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) **600004582896-3**  
**-09/11/01--01043--013**  
**\*\*\*\*271.25 \*\*\*\*\*78.75**

4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

RECEIVED  
 DEPT. OF STATE  
 CORPORATE FILING  
 2001 SEP 11 AM 10:59  
 TO ADMINISTRATIVE SERVICES  
 SUFFICIENTLY FILED

Wait in

Pick up time

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Mail out

Will wait

Photocopy

Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**FILED**  
 01 SEP 11 PM 1:21  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

Examiner's Initials

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ABCO SUNSHINE REALTY CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

950 SW 104 COURT SUITE 302 MIAMI, FL 33174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO TRANSACT ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES (FIVE HUNDRED SHARES) \$ 1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

PATRICIA BARBOSA D  
950 SW 104 COURT SUITE 302  
MIAMI, FL 33174

ALEXANDER BARBOSA D.  
950 SW 104 COURT  
MIAMI, FL 33174

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALEXANDER BARBOSA  
950 SW 104 COURT SUITE 302  
MIAMI, FL 33174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALEXANDER BARBOSA.  
950 SW 104 COURT SUITE 302  
MIAMI, FL 33174

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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