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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

2002 MAY 30 AM 7:57
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TALLAHASSEE FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.
AMBRIZ DISTRIBUTING, INC.

Certificate of Status	0
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5/31/02

ARTICLES OF INCORPORATION
OF
AMBRIZ DISTRIBUTING, INC.

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TALLAHASSEE FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I. NAME The name of the corporation is, AMBRIZ DISTRIBUTING, INC., located at 8744 S.W. 8th St., Miami, FL 33174.

ARTICLE II. DURATION. The term of existence of the corporation is perpetual.

ARTICLE III. PURPOSE. The corporation may transact any and all lawful business for which corporation may be incorporated under the Florida General Corporation Act.

ARTICLE IV. CAPITAL STOCK. The aggregate number of shares which the corporation has authority to issue is 500, all of which shall be common shares of the par value of \$1.00 per share.

ARTICLE V. REGISTERED OFFICE. The street address of the initial registered office of the corporation is 8744 S.W. 8th St. Miami, FL 33174, and the initial registered agent at such address is Elsa Ambriz.

ARTICLE VI. DIRECTOR. The corporation shall have one director initially. The number of directors may be increased from time to time by by-laws adopted by the stockholders, but shall never be less than one.


Prepared by: Sadkowski & Associates
500 N.E. Spanish River Blvd. #28A
Boca Raton, FL 33431
561-368-1773

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ARTICLE VII. INITIAL DIRECTOR. The name and post office address of the member of the first Board of Director is:

Elsa Ambriz
8744 S.W. 8th St.
Miami, FL 33174

IN WITNESS WHEREOF, I have subscribed my name this 28th day of MAY, 2002.



Elsa Ambriz
8744 S.W. 8th St.
Miami, FL 33174


STATE OF FLORIDA
COUNTY OF PALM BEACH

On this 28th day of MAY, 2002, before me, a Notary Public, duly authorized in the State and County named above to take acknowledgements, personally appeared Elsa Ambriz, to me known to be the person whose name is subscribed to the within instrument, and acknowledged that she executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.



NOTARY PUBLIC, STATE OF FLORIDA

 Eugene J Sedkowiak
My Commission DD075000
Expires December 05, 2005

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ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above stated corporation, at the office stated above, I hereby accept to act in the capacity of Registered Agent and agree to comply with the provisions relative to keeping said office open.


Registered Agent

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