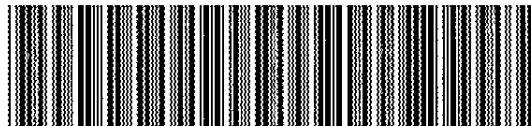


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

Handwritten initials

ARTICLES OF INCORPORATION

FILED

04 MAR -5 PM 1:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: LOS AMIGOS TIENDA, INC.

ARTICLE II PRINCIPAL OFFICE

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

13159 N. W. CR 12

BRISTOW, FL. 32321

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200 SHARES PAR VALUE OF \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: JOSEPHINE MONTIEL, 204 MIDDLE CREEK, QUINCY, FL.32351

ARTICLE V INCORPORATOR(S)

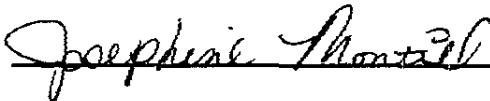
See instructions for officers/directors

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

JOSEPHINE MONTIEL
204 MIDDLE CREEK
BRISTOW, FL. 32351

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this _____ day of _____, 2004.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

Note: affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**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 the corporation is: LOS AMIGOS TIENDA, INC.

2. The name and address of the registered agent and office is:

(Name)

JOSEPNINE MONTIEL

(P.O.Box or Mail Drop Box **NOT** acceptable)

204 MIDDLE CREEK

(City/State/zip)

QUINCY, FL. 32351

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Josephine Montiel
(Signature)

(date)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314