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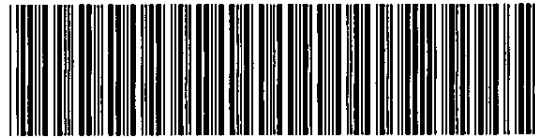
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 AUG 17 2011
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CORPORATE FILING SERVICE

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

1. CARASEGA ENTERPRISES INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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Examiner's Initials

**ARTICLES OF INCORPORATION
OF**

CARASEGA ENTERPRISES INC

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) Competent to contract, hereby form a corporation under the laws of the State of Florida.

**ARTICLE I
CORPORATION NAME**

The corporation's name shall be: CARASEGA ENTERPRISES INC

**ARTICLE II
DURATION**

The corporation shall exist perpetually unless dissolved according to Florida Laws.

**ARTICLE III
PURPOSE**

The corporation is organized for the purpose of engaging in any activity of business Permitted under the laws of the United States and the State of Florida.

**ARTICLE IV
CAPITAL STOCK**

The corporation is authorized to issue ONE HUNDRED (100) shares of FIVE DOLLARS (\$ 5.00) par value Common Stock, which shall be designated as "Common Shares".

**ARTICLE V
PLACE OF BUSINESS**

The principal place of business of said corporation shall be:

304 W 19 Street

Hialeah, FL 33010

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ARTICLE VI
NUMBER OF DIRECTORS

The number of Directors of this corporation, shall be no less than one (1) nor more than fifteen (15).

ARTICLE VII
BOARD OF DIRECTORS

The name and addresses of the first Board of Directors of this Corporation who shall hold office initially, are as follows:

NAME SIXTO R. VALENZUELA
ADDRESS 304 W 19 Street
CITY Hialeah STATE FL Z C 33010

NAME _____
ADDRESS _____
CITY _____ STATE _____ Z C _____

NAME _____
ADDRESS _____
CITY _____ STATE _____ Z C _____

ARTICLE VIII
INCORPORATORS

The name and addresses of the incorporators signing these Articles of Incorporation, are as follows:

NAME SIXTO R. VALENZUELA TITLE President
ADDRESS 304 W 19 Street
CITY Hialeah STATE FL Z C 33010

NAME _____ TITLE _____
ADDRESS _____
CITY _____ STATE _____ Z C _____

NAME _____ TITLE _____
ADDRESS _____
CITY _____ STATE _____ Z C _____

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation, this 11 day of August of 2011

 _____ (Seal)

_____ (Seal)

STATE OF FLORIDA)
) SS
COUNTY OF DADE)

Before me, a Notary Public authorized to take acknowledgement in the State and County set for above, personally appeared:

SIXTO R. VALENZUELA

Known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that _____ executed these Articles of Incorporation

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and county aforesaid, this 11 day of August of 2011.

L. Ballina

Notary Public
State of Florida at Large



L. BALLINA
MY COMMISSION # DD 914555
EXPIRES: August 13, 2013
Bonded Thru Budget Notary Services

CERTIFICATE OF REGISTERED AGENT

OF

CARASEGA ENTERPRISES INC

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

FIRST: That SIXTO R. VALENZUELA desiring to organize under the laws of the State of Florida with its principal office as indicated in the articles of incorporation at the City of Miami, County of M-Dade State of Florida, has named:

Mr/Ms SIXTO R. VALENZUELA
Located at 304 W 19 Street
City of Hialeah County of Miami-Dade
State of Florida

At its Agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.


Registered Agent

SECRETARY OF STATE
TALLAHASSEE, FL 32310

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