

P960000398

1/9/96

FLORIDA DIVISION OF CORPORATIONS
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ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399

FROM: FAB-T CORP. AGENTS, INC.
8405 NW 53RD ST
SUITE C-100
MIAMI FL 33166-

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FAX: (904) 922-4000

((H9600000398))

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: C G SO. FLA INVESTMENT, INC.

FAX AUDIT NUMBER: H9600000398

CURRENT STATUS: REQUESTED

DATE REQUESTED: 01/09/1996

TIME REQUESTED: 12:00:09

CERTIFIED COPIES: 1

CERTIFICATE OF STATUS: 0

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** ENTER 'M' FOR MENU. **

1/09/96

FLORIDA DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

[Handwritten signature]

FLORIDA DIVISION OF CORPORATIONS

96 JAN -9 PM 1:05

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MAY -9 PM 3:58
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE OF INCORPORATION

OF

C G SO. FLA. INVESTMENT, INC.

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

ARTICLE I NAME

The name of the corporation shall be: C G SO. FLA. INVESTMENT, INC.

The principal place of business of this corporation shall be:
8853 NW. 151 St.
Miami, Fl. 33016

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 State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 x \$ 10.00 = \$ 1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

Prepared by: Basic Accounting Service
692 W. 29th St., Suite 9
Hialeah, FL 33012
(305) 887-4185

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: _____
C G So. Fla. Investment, Inc.

2. The name and address of the registered agent and office is _____
Vivian Cabrerizo (Name)
7328 Jacaranda Ln.
(P. O. BOX NOT ACCEPTABLE)
Miami Lakes, Fl.33014
(CITY/STATE/ZIP)

96 JAN -9 PM 3:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE Vivian Cabrerizo

DATE 1-9-96