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96 JUN -7 MIII: 11

PRESTICERAL LASTRICE ACCOUNT NO. :

072100000037 CORPORATION

REFERENCE :

979889

83522A

AUTHORIZATION :

COST LIMIT : \$ 122.50

ORDER DATE: June 7, 1996

ORDER TIME :

10:40 AM

ORDER NO. : 979889

400001855554

CUSTOMER NO:

83522A

CUSTOMER: Luciano Isla, Esq

LUCIANO ISLA, ESQ

S' 'te 300

1790 W. 49th Street Hialeah, FL 33012

DOMESTIC FILING

NAME:

SIBONEY CITRUS, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION

\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

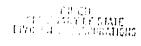
XX CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Daniel W Leggett

EXAMINER'S INITIALS:



## ARTICLES OF INCORPORATION

OF

96 JULY 7 PHY2: 45

### SIBONEY CITRUS, INC.

ARTICLE I - NAME

SIBONEY CITRUS, INC.

### **ARTICLE II - DURATION**

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

### **ARTICLE III - PURPOSE**

This corporation is organized for the purpose of transacting any and all lawful business.

### ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue One Hundred (100) Shares of \$1.00 par value common stock, which shall be designated "Common Shares".

### **ARTICLE V - PRE-EMPTIVE RIGHTS**

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his/her prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to the others.

# ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT AND PRINCIPAL OFFICE

The street address of the initial registered office/principal office of this corporation is 1790 West 49th Street, Suite 300, Hialeah, Florida, and the name of the ini. registered agent of this corporation at that address is LYDIA M. ISLA.

#### ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have one director constituting the initial Board of Directors.

The number of Directors may be either increased or decreased from time to time by the By-Laws.

The name(s) and address(es) of the initial Board of Directors of this corporation is/are:

<u>NAME</u>

**ADDRESS** 

Jose Rene Caraballo

P/S/T/D

5005 Collins Avenue, #1218 Miami Beach, FL 33140

## **ARTICLE VIII - INCORPORATORS**

The name and address of each person signing these Articles is:

**NAME** 

**ADDRESS** 

Lydia M. Isla

1790 West 49th Street, #300 Hialeah, FL 33012

### ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by Law.

## ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the	undersigned subscriber has executed these Articles
of Incorporation, thisday of	JUNE 1996.
	The state of the s
STATE OF FLORIDA	LYDIAM ASLA

COUNTY OF DADE

BEFORE ME, a Notary Public, authorized to take acknowledgments in the State and County set forth above, personally appeared, LYDIA M. ISLA, known to be and known by me to me the person who executed the foregoing Articles of Incorporation, and she acknowledged before me that she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal in the State and County aforesaid, this Laday of Jone, 1996.

My Commission Expires:

OFFICIAL NOTARY SEAL LIBIA M COTO NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC/ 12595 MY COMMISSION EXP. 54PT 8,1998 NOTARY PUBLIC, STATE C

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## CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

FIRST -- THAT SIBONEY CITRUS, INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF HIALEAH, STATE OF FLORIDA, HAS NAMED LYDIA M. ISLA, LOCATED AT 1790 WEST 49TH STREET, SUITE 300, HIALEAH, 7 FL 33012, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

BY:

DATE:

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

SIGNATURE:

DATE: