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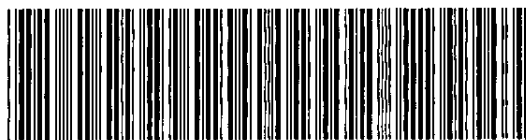
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10 AUG 27 AM 10:21

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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10 AUG 27 AM 9:57

SECRETARY OF STATE  
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10 AUG 27 AM 9:57

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

VALIDATION ONLY

8/26/10

IVONNE S. CORDOBA

Requester's Name

157 NW 27 AVE #202

Address

Miami, FL 33125

City

State

ZIP

Phone

(305) 649-5944

CORPORATION(S) NAME

DAMO U.S.A. CORPORATION



Profit

( ) NonProfit

( ) Amendment

( ) Merger

( ) Foreign

( ) Dissolution

( ) Mark

( ) Limited Partnership

( ) Annual Report

( ) Other

( ) Reinstatement

( ) Reservation

( ) Change of Registered Agent



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Empire Toll Free: 1-800-432-3028

**ARTICLES OF INCORPORATION**

**OF**

**DAMO U.S.A. CORPORATION**

**FILED**  
10 AUG 27 AM 9:57  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The Undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles for profit.

**ARTICLE I - NAME**

The name of the corporation shall be **DAMO U.S.A. CORPORATION**. The existence of this corporation shall commence upon the filing of these Articles on Incorporation and shall continue perpetually unless dissolved by law.

**ARTICLE II - PRINCIPLE OFFICE**

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

**3130/3190 WEST 15<sup>th</sup> AVENUE  
HIALEAH, FL 33012**

**ARTICLE III - NATURE OF BUSINESS**

This corporation is being organized for the purpose of providing services in manufacturing and production of cookies. This corporation may also engage in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

**ARTICLE IV - CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is ten-thousand shares (10,000) of common stock with pare value of one dollar (\$1.00) per share.

PREPARED BY:  
**IVONNE S. CORDOBA, ESQUIRE**  
**ATTORNEY AT LAW: NEW YORK BAR NO.: 296428**  
757 NW. 27TH AVENUE, SUITE 202  
MIAMI, FL. 33125  
TEL. NO.: (305) 649-5944 / FAX NO.: (305) 649-9535

TEL. NO.: (305) 649-5944 / FAX NO.: (305) 649-9535

## **ARTICLE V - INITIAL REGISTERED AGENT AND ADDRESS**

The name of the initial registered agent and address is:

JAIME IRIARTE ANGULO  
3130/3190 WEST 15th AVENUE  
HIALEAH, FL 33012

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TALLAHASSEE FLORIDA

## **ARTICLE VI - INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation

JAIME IRIARTE ANGULO  
3130/3190 WEST 15th AVENUE  
HIALEAH, FL 33012

## **ARTICLE VII - OFFICERS AND DIRECTORS**

The initial board of directors of the corporation shall be composed of one director. The name and address of the initial officer(s) and director(s) shall hold office for the first year of the corporation, or until a successor(s) is elected or appointed is\are:

NAME	ADDRESS	POSITION
JAIME IRIARTE ANGULO	3130/3190 W. 15th AVE. HIALEAH, FL 33012	PRESIDENT

## **ARTICLE VIII - CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles of incorporation, 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.

The undersigned incorporator has executed these Articles of Incorporation this 20<sup>TH</sup> of AUGUST, 2010.

\_\_\_\_\_  
JAIME IRIARTE ANGULO  
REGISTERED AGENT/INCORPORATOR

**NOTARY PUBLIC**

**FILED**

**STATE OF FLORIDA  
COUNTY OF MIAMI-DADE**

**10 AUG 27 AM 9:57**

**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**

**I HEREBY CERTIFY** that the foregoing Articles of Incorporation were subscribed  
before me by **JAIME IRIARTE ANGULO** who produces **PASSPORT** as proof of **JAIME**  
**IRIARTE ANGULO** identification on this 20<sup>th</sup> of **AUGUST, 2010** in **MIAMI, FLORIDA,**  
**[DADE COUNTY].**

**MY COMMISSION EXPIRES:**



**SIGNATURE OF NOTARY PUBLIC OR OFFICER  
ADMINISTERING OATH)**

