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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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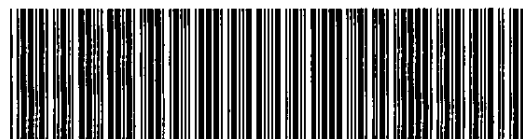
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/19/10--01012--002 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 DEC 27 PM 4:23

APPROVED
FILED

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CORPORACION EL SAMAN, INC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CARMEN M PETERS, CPA

Name of Person

FERNANDEZ-BERGNES & ASSOCIATES, P.A.

Firm/Company

7400 West Flagler Street

Address

Miami, FL 33144

City/State and Zip code

afernandez@affbcpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carmen M Peters, CPA at (305) 648-7100

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:



\$70.00 Filing Fee



\$78.75 Filing Fee &
Certificate of Status



\$78.75 Filing Fee &
Certified Copy



\$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 22, 2010

CARMEN M PETERS, CPA
7400 WEST FLAGER STREET
MIAMI, FL 33144

SUBJECT: CORPORACION EL SAMAN, INC.
Ref. Number: W10000054712

We have received your document for CORPORACION EL SAMAN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Director or Officer that signed on line 13 and 14 also has to be listed on line 12 of the application.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 510A00027388

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. CORPORACION EL SAMAN, INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Panama 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 26, 2009 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7400 West Flagler Street Miami, FL 33144
(Principal office address)

7400 West Flagler Street Miami, FL 33144
(Current mailing address)

8. Real Estate Investment
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

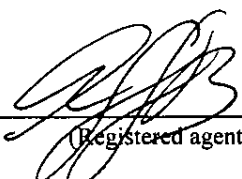
Name: Fernandez-Bergnes & Associates, P.A.

Office Address: 7400 West Flagler Street

Miami, Florida 33144
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 DEC 27 PM 4:23

APPROVED
AND
FILED

APPROVED
AND
FILED

10 DEC 27 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Elias Mazloun Kassabji

Address: 7400 West Flagler Street

Miami, FL 33144

Vice President: Jorge Mazloun Kassabji

Address: 7400 West Flagler Street

Miami, FL 33144

Secretary: Miguel Antonio Mazloun Kassabji

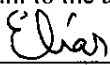
Address: 7400 West Flagler Street Miami, FL 33144

Treasurer: Elias Mazloun Kassabji

Address: 7400 West Flagler Street Miami, FL 33144

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____


Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. _____

Elias Mazloun Kassabji

(Typed or printed name and capacity of person signing application)

APPROVED
AND
FILED

TRANSLATION

10 DEC 27 PM 4:29

REPUBLIC OF PANAMA
PANAMA PUBLIC REGISTRY
CERTIFIES

SECRETARY OF STATE No. 252107
TALLAHASSEE, FLORIDA PAG-1
// DELOS//

BY VIRTUE OF REQUEST: 10 - 602851

----- THAT THE CORPORATION: -----
CORPORACION EL SAMAN S.A.

Is duly recorded at Microjacket: 683073 Document: 1684829 as of November twenty sixth, two thousand nine.

THAT the corporation is in Good Standing.

THAT its Subscribers are:

- 1) GABRIEL CHOY
- 2) ELISA EDGHILL

THAT its directors are:

- 1) ELIAS MAZLOUM KASSABJI
- 2) JORGE MAZLOUM KASSABJI
- 3) MIGUEL ANTONIO MAZLOUM KASSABJI

THAT its Officers are:

PRESIDENT	-	ELIAS MAZLOUM KASSABJI
VICE-PRESIDENT	-	JORGE MAZLOUM KASSABJI
TREASURER	-	ELIAS MAZLOUM KASSABJI
SECRETARY	-	MIGUEL ANTONIO MAZLOUM KASSABJI

THAT the Legal Representation will be exercised:

The President and in his absence the Vice-President or any person designated by the board of directors.

THAT its Resident Agent is ROSAS & ROSAS

THAT its capital is of 10,000.00 American Dollars.

THAT its Duration is Perpetual

THAT its Domicile is Panama

Issued and signed in the Province of Panama on the twelfth day of October, two thousand ten, at 03:58:18, P.M.



REGISTRO PUBLICO DE PANAMA

No. 252107

CERTIFICADO

CON VISTA A LA SOLICITUD 10 602851

QUE LA SOCIEDAD

CORPORACION EL SAMAN S.A.

SE ENCUENTRA REGISTRADA LA FICHA 683073 DOC 1684829 DESDE

VEINTISEIS DE NOVIEMBRE DE DOS MIL NUEVE

QUE LA SOCIEDAD SE ENCUENTRA VIGENTE

QUE SUS SUSCRIPTORES SON:

1.) GABRIEL CHOY

2.) ELISA EDGHELL

QUE SUS DIRECTORES SON:

1.) ELIAS MAZLOUM KASSABJI

2.) JORGE MAZLOUM KASSABJI

3.) MIGUEL ANTONIO MAZLOUM KASSABJI

QUE SUS DIGNATARIOS SON:

PRESIDENTE

ELIAS MAZLOUM KASSABJI

VICE-PRESIDENTE

JORGE MAZLOUM KASSABJI

TESORERO

ELIAS MAZLOUM KASSABJI

SECRETARIO

MIGUEL ANTONIO MAZLOUM KASSABJI

QUE LA REPRESENTACION LEGAL LA EJERCERA

EL PRESIDENTE Y EN SU AUSENCIA EL VICEPRESIDENTE O CUALQUIER PERSONA

QUE DESIGNE LA JUNTA DIRECTIVA

QUE SU AGENTE RESIDENTE ES ROSAS Y ROSAS

QUE SU CAPITAL ES DE \$10.000.000,00 DOLARES AMERICANOS

QUE SU DURACION ES PERPETUA

QUE SU DOMICILIO ES PANAMA

EXPEDIDO Y FIRMADO EN LA PROVINCIA DE PANAMA

EL DOCE DE OCTUBRE

DEL DOS MIL DIEZ A LAS OCHO Y CINCO

NOTA: SI GISTIA CERTIFICACION PAGO DERECHOS

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