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LAZARUS CORPORATE FILING SERVICE

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3320 S.W. 87 AVENUE

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

200004524252--4

-08/08/01--01022--020

***78.75 ***78.25

OFFICE USE ONLY

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

1. TAMAMI PROPERTIES OWNERS ASSOCIATION, INC. (Corporation Name) (Document #)

2. INC. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)



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Photocopy



Certificate of Status

RECEIVED
01 AUG -8 AM 10:13
DIVISION OF CORPORATION

NEW FILINGS	
<input type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
01 AUG -8 PM 2:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Examiner's Initials

ARTICLES OF INCORPORATION

FOR

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME:

The name of the corporation shall be:

TAMIAMI PROPERTIES OWNERS ASSOCIATION, INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

9360 SUNSET DR. # 291
MIAMI, FLORIDA, 33173

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):
TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE
UNITED STATES OF AMERICA AND OF THE STATE OF FLORIDA.

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

BY THE BY LAWS

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

AUGUSTO J. GIL
9360 SUNSET DR. # 291
MIAMI, FLORIDA, 33173

ARTICLE VII DIRECTORS (must have the minimum of three directors): **NAME AND ADDRESS**

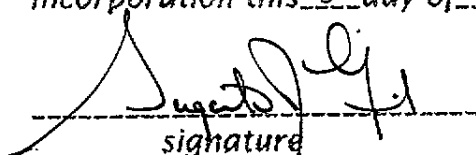
AUGUSTO J. GIL	9360 Sunset Dr. # 291. Miami, Florida, 33173
JULIA GIL	9360 Sunset Dr. # 291. Miami, Florida, 33173
ALEX GIL	9360 Sunset Dr. # 291. Miami, Florida, 33173

ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of Incorporator is:

AUGUSTO J. GIL
9360 Sunset Dr. # 291
Miami, Florida, 33173

The undersigned incorporator has executed these Articles of Incorporation this 3 day of August, 2001


signature

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

PURSUANT TO THE PROVISIONS OF SECTION 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:

TAMIAMI PROPERTIES OWNERS ASSOCIATION, INC.
(must include suffix)

2. The name and address of the registered agent and office is:

AUGUSTO J. GIL

(NAME)

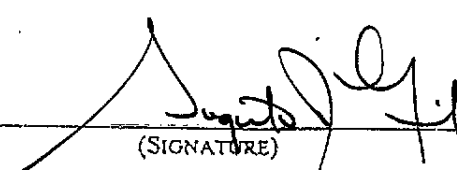
9360 SUNSET DR. # 291

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

MIAMI, FLORIDA, 33173

(CITY/STATE/ZIP)

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


(SIGNATURE)

8/3/01
(DATE)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA