Division of Corporations

# 000007305

## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number: I19990000017

Phone : (305)485-9300 Fax Number : (305)485-1098

### FLORIDA PROFIT CORPORATION OR P.A.

SANTAMARIA &SON, INC.

Certificate of Status	0
Certified Copy Page Count	1 05
Estimated Charge	\$78.75

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#### ARTICLES OF INCORPORATION

OF

#### SANTAMARIA & SON, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

SANTAMARIA & SON, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

(1) Transact any and all lawful business.

(2) Said corporation shall further have powers:

To have perpetual succession by its corporate

name:

SANTAMARIA & SON, INC.

Hora Giraldo. 4080 SW BLAVE Mami, fl. 33155 (305) 485 9300

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#### **ARTICLE IV**

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

RAUL SANTAMARIA 2359 W 10 AVE. HIALEAH, FL 33010

The principal office shall be:

2359 W 10 AVE. HIALEAH , FL 3301( H0000000 3633 5

#### ARTICLE VI

The initial Board of Directors shall consist of a total of **ONE (01)** person, and the name and address of the person who is to serve as an initial director is:

RAUL SANTAMARIA 2359 W 10 AVE HIALEAH, FL 33010

president

The name and address of the incorporator executing these Articles of Incorporation is:

RAUL SANTAMARIA 2359 W 10 AVE. HIALEAH, FL 33010

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 22 day of JANUARY , 2000

RAUL SANTAMARIA

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision 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:

#### SANTAMARIA & SON, INC.

2. The Name and Address of the registered agent and office is

RAUL SANTAMARIA 2359 W 10 AVE. HIALEAH , FL 33010

HAVING BEEN NAMED AS REGISTERED AGEN1 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 FURTHE

R AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. ANN I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

**SIGNATURE** 

Dated: JANUARY 22, 2000

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SECRETARY OF STATE DIVISION OF CORPORATIONS