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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

: FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone

(305) 599-0839

Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

JITZA IMPORTS AND EXPORTS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

of

JITZA IMPOR	TS AND EXPORTS, INC.	
	(name of corporation)	
The undersigned acting as the incorporators of the following articles of incorporation for such corporation for such corporation.	of a corporation under the Florida Busin poration:	ess Corporation Act, adopt(s).
ART	TICLE I - CORPORATE NAME	. TA
The name of the corporation is:		ECT -
JITZA IMPOR	TS AND EXPORTS, INC.	
		SSE SE
	ARTICLE II - DURATION	79 R
This corporation shall exist perpetually unless	s dissolved according to Florida law.	OO HAR 30 PH 12: 00 SECRETARY OF STATE ALLAH SSEE, FLORID
· · · · ·	ARTICLE III - PURPOSE	>
The corporation is organized for the purpose of finited States and the State of Florida.	of engaging in any activities or business	permitted under the laws of the
· AR	TICLE IV - CAPITAL STOCK	•
The corporation is authorized to issue 100	shares of common stock, par value	S per share.
ARTICLI The street address of the initial principal office	EV - INITIAL PRINCIPAL OFFICE and, if different, the mailing address i	
STREET ADDRESS		
969 NW 126 Ct		
CITY MIAMI	ELORIDA	ZIP 33182
Mailing address, if different STREET ADDRESS		
and water	·	
CITY	FLORIDA	ZIP
· ARTICLE VI - INE	TIAL REGISTERED OFFICE AND A	AGENT
The street address of the initial registered	office and the name of the initial re	gistered agent at the office is:
NAME JORGE A. PEREZ		
ADDRESS . OCD NW 176 Ct		•

CITY

FLORIDA

This corporati		2 directors initially. The	number of directors may b
	on shall have	Laws, but shall never be less than to oflows:	nie (1). The names and
NAME	JORGE A. PEREZ		
ADDRESS	969 NW 126 Ct	A	,
CITY	MIAMI	STATE Florida	ZIP 331 82
NAME	JITZA BALDRICHE		
ADDRESS	969 NW 126 Ct		
CITY	MIANI	STATE Florida	ZIP 33182
NAME			
ADDRESS		,	,
CITY		STATE	ZIP
NAME	JORGE & PERFZ		
NAME	JORGE A PEREZ		
ADDRESS	969NW 126 Ct	STATE TO	ZIP
CITY	TMATM	SIMIC Florida	321.8.2
NAME	JITZA BALDRICHE		
ADDRESS	969 NW 126 Ct		
CITY	MTAMI	STATE Florida	ZIP ₃₃₁₈₂
NAME			
ADDRESS			
CITY		STATE	ZIP
The undersigned	incorporator(s) have executed these	Articles of Incorporation this _	27
	RCH.	2000	(Signature)
		1 1	(Signature)
			(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered of as indicated in the Articles of Incorporation at969_NW_126_Ct		(name of co	s AND EXPORTS proporation)	
The above corporation, organized under the laws of the State of Florida with its registered of as indicated in the Articles of Incorporation at	•			•
The above corporation, organized under the laws of the State of Florida with its registered of as indicated in the Articles of Incorporation at	orsuant	to Florida Statutes Sections 48.091 and	607.0501, the follow	ving is submitted:
as indicated in the Articles of Incorporation at969				•
MIAMI, EL 33182 mas named		- ·	•	•
nas namedJORGE A. PEREZ ocated at the aforesaid address, as its registered agent to accept service of process within this		·		
ocated at the aforesaid address, as its registered agent to accept service of process within thi		MIAMI, EL 33182		<u> </u>
ocated at the aforesaid address, as its registered agent to accept service of process within this	as name	JORGE A. PEREZ	_	
			igent to accept servi	ce of process within this
inite.			-	•
	iaie.			
	,			

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.

(Date)

PMIZ: 00