

# LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

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

1. CUBAMEX INC.

(Corporation Name)

(Document #)

2. \_\_\_\_\_  
(Corporation Name)

(Document #)

3. \_\_\_\_\_  
(Corporation Name)

(Document #)

4. \_\_\_\_\_  
(Corporation Name)

(Document #)

☐ Walk in

☒ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input 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/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

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-05/12/00--01085--021  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

RECEIVED  
00 MAY 12 AM 11:51  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
00 MAY 12 PM 2:30  
TALLAHASSEE, FLORIDA  
STATE SECRETARY OF

## ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I - NAME

The name of the corporation shall be: *CUBAMEX INC.*

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00 MAY 12 PM 2:30  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

### ARTICLE II - PRINCIPAL OFFICE

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

*3795 West 7th LANE  
HIALEAH, FL 33012*

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

*100*

### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Roberto M. Garcia  
235 W. 16th ST.  
HIALEAH, FL 33010*

ARTICLE V - INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Rogelio J. Garcia

159 W. 16th ST.

Hialeah, FL 33010

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 11 day of May, 2000.



Signature

ARTICLE VI - DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

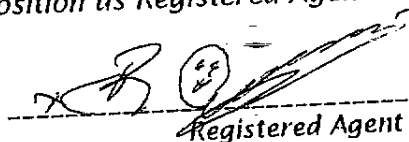
ROBERTO M. GARCIA - PRESIDENT.

235 W. 16th ST.

HIALEAH, FL 33010

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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

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00 MAY 12 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA