EMPIRE CORPORATE KIT JUN-28-2000 15:15 Florida Department of State

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

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000034507 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)922-4001

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)541-3694 Phone Fax Number : (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

SALAZAR NURSERY CORP.

Certificate of Status	0
Certified Copy	
Page Count	04)
Estimated Charge	\$78.75



H00000034507

ARTICLES OF INCORPORATION

OF _ -

SALAZAR NURSERY CORP.

These Articles are in compliance with Chapter 607, F.S.

Article I

The name of this corporation shall be:

SALAZAR NURSERY CORP.

Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

Article III

The principal place of business and mailing address of this corporation shall be: 27850 OLD DIXIE HIGHWAY HOMESTEAD, FL 33032

Article IV

The general nature of business of this corporation is to transact any and all lawful business.

Article V

The number of shares which this corporation shall have authority to issue are 100 shares of common stock having an individual par value of \$1.00

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 VI

The name and street address of the initial Registered Agent of this corporation shall be: CLAUDIA PATRICIA SALAZAR HERRERA 27850 OLD DIXIE HIGHWAY HOMESTEAD, FL 33032

PREPARED BY: RAY STORMONT, EMPIRE CORPORATE KIT COMPANY, 1492 WEST FLAGLER STREET, #200, MIAMI, FL 33135, (305) 541-3694

H00000034507

H00000034507

The initial board of Directors shall consist of a total of 2 person(s) and the name and address of the person(s) who are to serve as an initial director(s):

JAVIER SALAZAR ROBLEDO PRES./DIR.

27850 OLD DIXIE HIGHWAY HOMESTEAD, FL 33032

CLAUDIA PATRICIA SALAZAR HERRERA VICE. PRES./DIR.

27850 OLD DIXIE HIGHWAY HOMESTEAD, FL 33032

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

> EMPIRE CORPORATE KIT OF AMERICA, INC. 1492 WEST FLAGLER STREET #200 MIAMI, FL 33135

The undersigned has executed these Articles of Incorporation this 28th day of JUNE, 2000.

Ray Stormont, President

Signing for Empire Corporate Kit of America, Inc.

H00000034507

H00000034507

CERTICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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.

First that	SALAZAR NURSE	RY CORP.		
	(Name	of Corporation)		
desiring to	organize under the laws o	of the State of <u>FLO</u>	RIDA_with its principal office	, as
indicated i	n the article of incorporati	on has named Cla	udia Patricia Salazar Herrera	8
located at	27850 Old Dixie Highw	ay	(Name of Registered Agent)	JUN 28
City of	Homestead	County of	Miami-Dade	7
- State of Fi	orida, as its agent to acce	nt service of proces	e within this state	

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

H00000034507