# POOOOOO Blorida Department of State

Division of Corporations
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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 SECRETARY OF STATE LLAHASSEE FLORIDA

# FLORIDA PROFIT CORPORATION OR P.A.

EL TIO OLE, INCORPORATED

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

T. SMITH 1007 3 1 2000

#### ARTICLES OF INCORPORATION

of

# EL TIO OLE, INCORPORATED (name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent of to contract, hereby form a corporation under the laws of the State of Florida.

#### ARTICLE I- CORPORATE NAME

The name of the corporation is:

#### EL TIO OLE, INCORPORATED

#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida Law.

#### ARTICLE III - PURPOSE

The corporation is organized for the purpose of operating as a mobile ice cream vendor.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue SIX HUNDRED shares (600) of ONE DOLLAR(S) (1.00) par value Common Stock, which shall be designated "Common Shares."

### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME

OLEGARIO BLANCO

ADDRESS

2687 KENTUCKY STREET

CITY

WEST PALM BEACH FLORIDA ZIP 33406

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The principal office, if known, or the mailing address of the corporation is:

NAME

EL TIO OLE, INCORPORATED

ADDRESS

2687 KENTUCKY STREET

CITY

WEST PALM BEACH FLORIDA ZIP 33406

# ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE(1) director(s) initially. The number of directors may be either increased or diminished from time to time by the bylaws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follow:

ADDRESS	OLEGARIO BLANCO	
	2687 KENTUCKY STREET	
CITY	WEST PALM BEACH FLORIDA ZIP 33406	_
NAME		
ADDRESS		
CITY	FLORIDA ZIP	
NAME		
ADDRESS		
CITY	FLORIDA ZIP	
NAME		
ADDRESS		
CITY	FLORIDA ZIP	
	ARTICLE VII - INCORPORATORS	
The names	and addresses of the incorporates signing	
these Arti	cles of Incorporation are as follows:	
NAME	OLEGARIO BLANCO	
ADDRESS	2687 KENTUCKY STREET	
CITY	WEST PALM BEACH FLORIDA ZIP 33406	_
NAME		
ADDRESS		
CITY	FIORIDA 77D	

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NAME	
ADDRESS CITY	FLORIDA ZIP
NAME ADDRESS CITY	FLORIDA ZIP
mave execu	WHEREOF, the undersigned and subscriber(s) ted these Articles of Incorporation this 17TH OBER of 2000.
	(Seal)
	(Seal)
<del></del>	(Seal)
	(Seal)

#### CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

EL TIO OLE, INCORPORATED (Name Corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

At:

EL TIO OLE INCORPORATED

2687 KENTUCKY STREET

WEST PALM BEACH, FLORIDA 33406

has named \_\_\_\_OLEGARIO BLANCO

located at the aforesaid address, as its Registered Agent to accept service of process within this state

#### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(REGISTERED AGENT)