

P00000113491
TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O.BOX 6327
Tallahassee, FL 32314

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-12/06/00--01037--008
*****78.75 *****78.75

SUBJECT: HPAGA GAM ENTERPRISES, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$78.75

FROM: CHRISTINE CHEW & ASSOCIATES

539 N MILLS AVE

ORLANDO, FL 32803

PHONE: 407-894-7259

Enclosures
Original and One Copy of Articles

00 DEC - 6 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

gy 12/12

Articles of Incorporation
of
HPAGA GAM ENTERPRISES, INC.

FILED
00 DEC -6 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

HPAGA GAM ENTERPRISES, INC.

Article II - Principal Office

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

5289 HARBORSIDE DR
TAMPA FL 33615

Article III - Shares

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

1000at \$.10

Article IV - Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

LA JA PHAGA
5289 HARBORSIDE DR
TAMPA FL 33615

Article V - Incorporator(s)

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

LA JA PHAGA
5289 HARBORSIDE DR
TAMPA FL 33615

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 1ST of DECEMBER, 2000.



Signature

Article VI-Officers & Directors

The names and address of the initial officers of the corporation who shall hold office for the corporation, or until their successors are elected or appointed are:

SENGKO SAMUEL PHAGA (DIRECTOR)
5289 HARBORSIDE DR
TAMPA FL 33615

LA JA PHAGA (DIRECTOR)
5289 HARBORSIDE DR
TAMPA FL 33615

***Certificate of Designation of
Registered Agent/Registered Office***

PURSUANT TO THE PROVISIONS OF SECTION 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:


HPAGUA GUM ENTERPRISES, INC.

2. The name and address of the registered agent and office is:

LA JA PHAGA
5289 HARBORSIDE DR
TAMPA FL 33615

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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

DATE