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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : SWAINE, HARRIS & SHEEHAN, P.A.

Account Number : I19980000021

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

LO MEJOR ENTERPRISES, INC.

Certificate of Status	0
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Page Count	04
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ARTICLES OF INCORPORATION
OF
LO MEJOR ENTERPRISES, INC..

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act hereby adopts the following articles of incorporation.

ARTICLE ONE

The name of the corporation is LO MEJOR ENTERPRISES, Inc.

ARTICLE TWO

The term of existence of the corporation is perpetual.

ARTICLE THREE

The corporation may transact any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

ARTICLE FOUR

The aggregate number of shares which the corporation has authority to issue is FIVE HUNDRED (500), all of which shall be common shares with a par value of \$1.00 per share.

ARTICLE FIVE

The street address of the initial registered office of the corporation is 315 Pulmosa Avenue, Lake Placid, Florida 33852, and the initial registered agent at such address is JAMES T. HINKLE, SR. The mailing address for the corporation is P. O. Box 1165, Lake Placid, Florida 33862.

The street address of the principal office of the corporation is 315 Pulmosa Avenue, Lake Placid, Florida 33852.

ARTICLE SIX

The board of directors of the corporation shall consist of not more than five (5) members. The name and address of the initial board of directors are:

NAME:

JAMES T. HINKLE, SR.

ADDRESS:

315 Pulmosa Avenue
Lake Placid, Florida 33852

ARTICLE SEVEN

The name and address of the sole incorporator are:

NAME:


ADDRESS:

JAMES T. HINKLE, SR.

315 Pulmosa Avenue
Lake Placid, Florida 33852


IN WITNESS WHEREOF, I have subscribed my name this 16th

day of January, 2001.


JAMES T. HINKLE, SR.
Incorporator

STATE OF FLORIDA
COUNTY OF HIGHLANDS

The foregoing instrument was acknowledged before me this 16th day of January, 2001, by JAMES T. HINKLE, SR., who is [X] personally known to me, or who has [] produced his _____ as identification and who did not take an oath.


J. TIMOTHY SHEEHAN
Notary Public, State of Florida
(Affix Seal)



"OFFICIAL SEAL"
J. Timothy Sheehan
My Commission Expires 10/10/2002
Commission #CC 752126

JAN-17-01 10:36AM FROM-SWAINE HARRIS AND SHEEHAN - LAKE PLACID 8634656999

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ACCEPTANCE

I agree as registered agent to accept service of process, to keep the registered office open during prescribed hours, and to post my name in some conspicuous place in the office as required by law.



JAMES T. HINKLE, SR.
Registered Agent

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TALLAHASSEE FLORIDA

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