Division of Corporations

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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 : FAS-T CORP. AGENTS, INC.

Account Number : 071001002336 Phone : (305)509-0836

Phone : (305)599-0839 Fax Number : (305)716-0346 DIVISION OF COMPONATIONS

## FLORIDA PROFIT CORPORATION OR P.A.

ACOSTA-RUBIO DISTRIBUTORS, CORP.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

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## ARTICLES OF INCORPORATION OF ACOSTA-RUBIO DISTRIBUTORS, CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### <u>ARTICLE I NAME</u>

The name of the corporation shall be: Acosta-Rubio Distributors, Corp.

The principal place of business of this corporation shall be: 6740 S.W. 69th Terrace, Miami, FL 33143

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

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

1,000 shares of Common Stock, \$1.00 par value

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(cs) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

| NAME                   | TITLE          | ADDRESS                |
|------------------------|----------------|------------------------|
| Edwin Acosta-Rubio     | President      | 6740 S.W. 69th Terrace |
| •                      |                | Miami, Fl. 33143       |
| Maria Acosta-Rubio     | Vice President | 6740 S.W. 69th Terrace |
|                        |                | Miami, FL 33143        |
| Marcelle Acosta-Rubio  | Treasurer      | 6740 S.W. 69th Terrace |
|                        |                | Miami, FI. 33143       |
| Veronica Acosta-Rubio  | Secretary .    | 6740 S.W. 69th Terrace |
|                        | -              | Miami, FL 33143        |
| Estefania Acosta-Rubio | Director       | 6740 S.W. 69th Terrace |
|                        |                | Miami, FL 33143        |

#### ARTICLE VI INCORPORATORS

The name(s) and street address(s) of the incorporator(s) to this articles of incorporation is (are)

| NAME               | <u>ADDRESS</u>         |
|--------------------|------------------------|
| Edwin Acosta-Rubio | 6740 S.W. 69th Terrace |
|                    | Miami, FL 33143        |

IN WITNESS WHERE OF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 16th day of January , 2000.

Signature(s) of Incorporator(s)

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## <u>CERTIFICATE OF DESIGNATION</u> <u>REGISTERED AGENT\REGISTERED OFFICE</u>

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organizes 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: Acosta-Rubio Distributors, Corp.
- 2. The name and address of the registered agent and office is: Edwin Acosta-Rubio, 6740 S.W. 69th Terrace, Miami, FL 33143

Signature

Title

Date 0//8/01

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 the statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

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