

CCRB
103 N. ... STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

PO1000019727

CONTACT: CINDY HICKS

DATE: 2-22-01

REF. #: 0575.14363

CORP. NAME: DE TODO UN POCO, INC.

FILED
01 FEB 22 PM 2:43
RECEIVED
01 FEB 22 AM 11:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA
DIVISION OF CORPORATION

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC-3 |
| <input type="checkbox"/> OTHER: _____ | | |

STATE FEES PREPAID WITH CHECK# 2976 FOR \$ 78.75

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: 200003747332--7
-02/22/01--01048--024
*****78.75 *****78.75

COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

T. SMITH FEB 22 2001

2

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:
DE TODO UN POCO, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
9700 CORAL WAY, SUITE A.
MIAMI, FLORIDA 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
OFFICE - BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:
100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):
DAVID OLIVA, PRESIDENT
9700 CORAL WAY, SUITE A
MIAMI, FLORIDA 33165

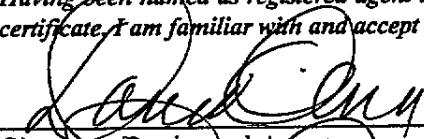
ARTICLE VI REGISTERED AGENT

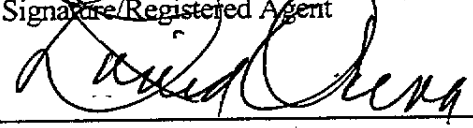
The name and Florida street address of the registered agent is:
DAVID OLIVA
9700 CORAL WAY, SUITE A
MIAMI, FLORIDA 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
DAVID OLIVA
9700 CORAL WAY, SUITE A
MIAMI, FLORIDA 33165

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator

2/21/01

Date
2/21/01

Date

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TALLAHASSEE FLORIDA