E ONLY LAZARUS CORPORATE FILING SERVICE (Requestor's Name) 3320 S.W. 87 AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Rick up time 2.00 Mail out Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Rrofit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILNGS REGISTRATION/ QUALIFICATION Annual Report **Foreign Fictitious Name** Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials



RECEIVED

FLORIDA DEPARTMENT OF STATE -4 PM 2:51

Katherine Harris Secretary of State DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

March 23, 2001

LAZARUS

MIAMI, FL

SUBJECT: SOUTH EAST INVESTMENT GROUP INC.

Ref. Number: W01000006592

We have received your document for SOUTH EAST INVESTMENT GROUP INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole Corporate Specialist New Filings Section

Letter Number: 001A00017770

ARTICLES OF INCORPORATION

The undersinged incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the Corporation shall be:

WYNWOOD INVESTMENT GROUP INC.



ARTICLE II PRINCIPAL OFFICE

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

382 N. W. 34 Street, Miami, Fla. 33127

ARTICLE III SHARES

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

ONE THOUSAND (1,000)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

MARIANO PALENZUELA 382 N. W. 34 Street, Miami, Florida. 33127

ARTICLE V INCORPORATORS

The names and street addresses of the incorporators to these Articles of Incorporation is (are)

Pres/ MARIANO PALENZUELA 382 N. W. 34 Street, MIami, Fla. 33127

Vice Pres./ JORGE ORELLANA 945 N. W. 32 Avenue, Miami, Fla. 33125 Treasurer

Secretary / FERNANDO COLLAZO 830 N. E 129 Street, North Miami, Fla. 33161

ARTICLE VI DIRECTORS

The names and street address of the directors to these Articles of Incorporation is (are):

President/ MARIANO PALENZUELA 382 N. W. 34 Street, Miami, Fla. 33127 Vice President& Treasurer/ JORGE ORELLANA 945 N.W 32 Ave. Miami, Fla. 33125 Secretary/ FERNANDO COLLAZO 830 N. E. 129 Street, North Miami, Fla. 33161

The undersigned incorporators has (have) executed these: Articles of Incorporation this <u>21st</u> day of <u>MARCH</u> year 200**1**.

SIGNATURE MARIANO PALENZUELA, Pres.

JORGE ORELLANA V. Pres./Treasurer

SIGNATURE.

FERNANDO COLLAZO. Treasurer.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the udnersigned 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:
WYNWOOD INVESTMENT GROUP INC
2. The name and address of the registered agent and office is:
MARIANO PALENZUELA (NAME)
382 N. W 34 Stret, (P.O.BOX NOT ACCEPTABLE)
Miami, Florida. 33127 (CITY /STATE / ZIP
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 Mariano Falenquela Mariano Palenquela
DATEMarch 21, 2001
Georgia Santific

STATE OF FLORIDA COUNTY OF DADE

The foregoing instrument was acknowledged before me this 21st day of March , 2001 by MARIANO PALENZUELA who is personally known to me or who has produced as identification Personally and who did (did not) take an oath.

Georgina Santiago
MY COMMISSION # CC875098 EXPIRES
September 28, 2003

GEORGINA SANTIAGO
TYPED OR PRINTED NAME OF NOTARY

STATE OF FLORIDA.

COUNTY OF DADE

The foregoin instrument was acknowledged before me this 21st day of MARCH , 2001 by JORGE ORELLANA who is personally known to me or who has produced as identification Personally known and who did (did not) take an oath.

Georgina Santiago
MY COMMISSION # CC875098 EXPIRES
September 28, 2003
BONDED THRU TROY FAIN INSURANCE, INC.

GEORGINA SANTIAGO

TYPED OR PRINTED NAME OF NOTARY.

STATE OF FLORIDA COUNTY OF DADE

The foregoing instrument was acknowledged before me
this 21 day of MARCH 2001 by FERNANDO COLLAZO
who is personally known to me or who has produced as
identification Personally knownd who did (did not) take
an oath.
Dergua Dout
NOTARY PUBLIC.
GEORGINA SANTIAGO
TYPED OR PRINTED NAME OF NOTARY Georgina Santiago
MY COMMISSION # CC875098 EXPIRES
September 28, 2003 BONDED THRU TROY FAIN INSURANCE, INC.
STATE OF FLORIDA.
COUNTY OF DADE
The foregoin instrument was acknowledged before me
thisday of, 2001 by
who is personally known to me or who has produced as
identificationand who did (did not) take
an oath.
NOTARY PUBLIC.

TYPED OR PRINTED NAME OF NOTARY.