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Florida Department of State

Division of Corporations **Public Access System** Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694

Fax Number

: (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

ANKO, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 05 |
| Estimated Charge | \$78.75 |

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ARTICLES OF INCORPORATION OF ANKO, INC.

THE UNDERSIGNED, have executed the following document as incorporators of the above named corporation, a corporation organized under the laws of the State of Florida and all rights duties and obligations of the undersigned as incorporators, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

| ARTICLE |
|---------|
|---------|

The name of the Corporation shall be:

ANKO, INC.

ARTICLE II

This Corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

SECRETARY OF STATE STATE OF CORPORATIONS

<u>ARTICLE III</u>

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

ARTICLE IV

The aggregated number of shares which this corporation shall have authority to issue is the total of 300 shares, having an individual par value of \$100.00 each, and shall be only Common class of stock on this corporation.

PREPARED BY:

CARLOS GRANIZO ACCOUNTANT 10920 W. FLAGLER ST.#204 MIAMI, FLORIDA 33174

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ARTICLE V

The name and address of the initial registered agent, registered office, and principal office of this incorporation shall be:

HECTOR A. BUSTILLO 5900 PALM TRACE LANDING DR. # 207 DAVIE, FL. 33314

ARTICLE VI

The initial Board of Director shall consist of one person and the name of the person who is to serve as initial director shall be:

HECTOR A. BUSTILLO

PRESIDENT/SECRETARY/TREASURER

ARTICLE VII

The name and address of the incorporator executing these Articles of Incorporation is:

HECTOR A. BUSTILLO 5900 PALM TRACE LANDING DR. #207 DAVIE, FL. 33314

IN WITNESS WHEREOF, the undersigned incorporators has executed these Articles of Incorporation this 12th day of September 2001.

HECTOR A. BUSTILLO

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In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That

ANKO, INC. (Name of Corporation)

desiring to organize under the laws of the State of Florida with its principal office, as

indicated in the Articles of Incorporation at the City of Miami, County of Dade, State of Florida has named

HECTOR A. BUSTILLO 5900 PALM TRACE LANDING DR. # 207 DAVIE, FL. 33314

(Street address and number of building, Post Office Box address not acceptable)

City of MIAMI, County of DADE, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

Y:____Signature

Register Agent

SECRETARY OF STATE DIVISION OF CORPORATIONS

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STATE OF FLORIDA)

COUNTY OF DADE)

BEFORE ME, a Notary Public, authorized to take acknowledgements in the state and county set forth above, personally appeared, HECTOR A. BUSTILLO, known to me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this 12th day of September 2001.

NOTARY PUBLIC, State of Florida

at Large

My Commission Expires:



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