Division of Corporations

Page 1 of 2

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

From:

Account Name : NATIONS BUSINESS CENTER, INC.

Account Number : 120000000238 Phone : (305)591~9448

Fax Number

: (305)591-4258

FLORIDA PROFIT CORPORATION OR P.A.

TIERRAS ANTIOQUENAS, INC.

Certificate of Status	0
Certified Copy	1 0
Page Count	01/2
Estimated Charge	\$78.75

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FAX AUDIT#:(((H01.000/07.5299)))

ARTICLES OF INCORPORATION

TO: SECRETARY OF STATE, STATE OF FLORIDA, TALLAHASSEE, FLORIDA

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.

ARTICLE I NAME

The name of the Corporation shall be:

TIERRAS ANTIQUENAS, INC.

The principal place of business of this corporation shall be:

14002 SW 161 TERRACE

MIAMI, FL 33177

ARTICLE II NATURE OF BUSINES

This corporation may engage in restaurant and any business permitted under the laws of the United State, 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: 1000.

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ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address (es) 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): Mary Sol Marin resides at 14002 SW 161 Terrace, Miami, FL 33177.

ARTICLE VI INCORPORATOR (S)

The names(s) and street address (es) of the incorporator(s) to these articles of incorporation is (are): Mary Sol Marin, whom resides at 14002 SW 161 TERRACE, MIAMI, FL 33177.

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this _/_ day of _______, 2001.

Signature(s	s) of Incorporator(s)	
Hary so	1 Hass	
Mary Sol M	farin/President/Incorporator	

FAX AUDIT: (((11010001075255)))

CERTIFICATE OF D

FAX AUDIT: (((Hロロロロロン) 5299

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the Undersigned 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: TIERRAS ANTIOQUENAS, INC.
- 2. The name and address of the registered agent and office is:

Raquel Escobal 3900 NW 79 Ave, Suite 326 Miami, FL 33166

SIGNATURE:

TITLE: Incorporator/Vice-President/Registered

Agenty

Date: ____/0/16/0,

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURES

Date: /0/16

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