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MIAMI, FLORIDA (305)552-5973	- · · · · · · · · · · · · · · · · · · ·
TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)	OFFICE USE ONLY
CORPORATION NAME(S) & DOCUMENT NUMI 1. GLORIA SANDONAL (Corporation Name) 2. (Corporation Name) 3. (Corporation Name) 4. (Corporation Name) Walk in Pick up time 9-00 Mail out Will wait Photocopy	
. Limited Liability Domestication Other Change of Regis Dissolution/With Merger REGISTRATA QUALIFICATI	R.A., Officer/Director stered Agent adrawal
Fictitious Name Name Reservation Foreign Limited Partner Reinstatement Trademark	

ARTICLES OF INCORPORÀTION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

GLOWA SANDOVAL INC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

2716 SW 137 AVE IT IMANI

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

2716 SW 137 AUC MIAMI FI 33175

ARTICLE V - INCORPORATOR

The name and stre Incorporation is:	eet address of th	•		rticles of
			137 Ave	
	MIAMI	P (33175	
The undersigned in Incorporation this	ncorporator has _25 day of	executed	these Articles of	k
·	A	Land	<u>m</u>	
	Si	ignature		

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Gloria SANDOVA President 27 (6 SW 137 AUC MIAMI Pl 33175

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature