

P01000110057

November 14<sup>th</sup>, 2001

Florida Department of State  
Division of Corporations  
New Filings Section  
409 Ease Gaines Street  
Tallahassee, FL 32399

100004684391--7  
-11/16/01--01008--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: 1829 INVESTMENTS, CORP.

Attached please find original and one (1) copy of the Articles of Incorporation for 1829 INVESTMENTS, CORP.. and a Western Union Money Order in the amount of \$ 78.75 to cover the following:

Filing Fees  
Registered Agent Designation  
Certified Copy

Please send me the Certified Copy of the Articles of Incorporation to the following address:

17210 N.W. 64<sup>th</sup> Ave. No. 213  
Miami, FL 33015

If you have any questions please call me at:

(305) 828-8413

I appreciate your kind cooperation,

Regards,

Hector Soto

FILED  
01 NOV 16 AM 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ps 11/16/01

FILED

01 NOV 16 AM 11:03

**ARTICLES OF INCORPORATION**

**OF**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**1829 INVESTMENTS, CORP.**

The undersigned incorporator, being of legal age and a natural person, for the purpose of creating 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:

**1829 INVESTMENTS, CORP.**

**ARTICLE II – DURATION**

This corporation shall commence its existence immediately upon filing these Articles of Incorporation and shall exist perpetually thereafter unless sooner dissolved, according to the law.

**ARTICLE III – PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation shall be:

17210 N.W. 64<sup>th</sup> Ave. No. 213  
Miami, FL 33 015

**ARTICLE IV – SHARES**

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

<b>Number of Shares Authorized</b>	<b>Par Value Per share</b>	<b>Class of Stock</b>
1,000	\$1.00	Voting Common

## ARTICLE V – INITIAL BOARD OF DIRECTORS

This corporation shall have two directors initially. The number of Directors may either be increased or decreased from time to time by the laws but shall never be less than two. The name and address of the initial directors of this corporation is:

<u>Name</u>	<u>Address</u>
Hector Soto	17210 N.W. 64 <sup>th</sup> Ave. No. 213 Miami, FL 33015
Veronica Soto	17210 N.W. 64 <sup>th</sup> Ave. No. 213 Miami, FL 330125

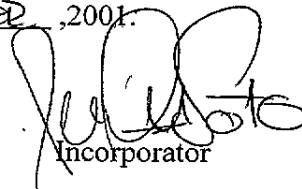
## ARTICLE VI – INCORPORATOR

<u>Name</u>	<u>Address</u>
Hector Soto	17210 N.W. 64 <sup>th</sup> Ave. No. 213 Miami, FL 33015

## ARTICLE VII – INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation, this 14 day of NOVEMBER, 2001.

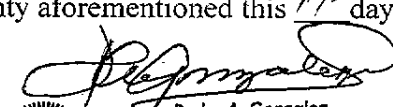
  
Incorporator

STATE OF FLORIDA           )  
  ) SS  
COUNTY OF MIAMI-DADE )

BEFORE ME, the undersigned authority, personally appeared, Hector Soto, known to be the person described in and who executed the foregoing Articles of Incorporation, who, after being duly sworn under oath, acknowledge before me that he executed the same for purposes herein expresses.

WITNESS my hand and official seal in the State and County aforementioned this 14 day of NOVEMBER, 2001



  
Pedro A. Gonzalez  
MY COMMISSION # DD010976 EXPIRES  
March 20, 2005  
BONDED THRU TROY FAIR INSURANCE, INC.

FILED

01 NOV 16 AM 11:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING REGISTERED AGENT  
AND ACCEPTANCE OF REGISTERED AGENT DESIGNATION**


Pursuant to Chapter 48.091, Florida Statute, the following is submitted, in compliance with said act:

FIRST: That 1829 Investments, Corp., is qualified to do business under the laws of the State of Florida with its principal office at 17210 N.W. 64<sup>th</sup> Ave. No. 213, Miami, FL 33015 and has appointed:

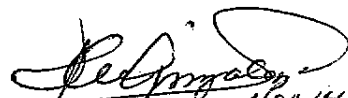
Hector Soto, 17210 N.W. 64<sup>th</sup> Ave. No. 213, Miami, FL 33015 agent to accept service of process within the State.

**ACKNOWLEDGMENT:**

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 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.

  
Hector Soto/Registered Agent



  
Pedro A. Gonzalez  
NOV. 14, 2004  
MY COMMISSION # DD010976 EXPIRES  
March 20, 2005  
BONDED THRU TROY FAIR INSURANCE, INC.