P01000174247

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

900004687379--1 -11/19/01--01053--013 ******87.50 ******87.50

SUBJECT: 1MUNDO, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	nclosed are an original and one (1) copy of the articles of incorporation and a check for:					
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy			

Status
ADDITIONAL COPY REQUIRED

FROM: _	Patricia Pardo	
_	Name (Printed or typed)	
	5700 Memorial Hwy. Suite 205	
	Address Tampa, Florida 33615 City. State & Zip	
	Tampa, Florida 33615	
	1	T D
	813-290-0113 Same Telephone number Same Same Same Same Same Same Same Same	
rua lardo	GAVE Daytime Telephone number	

AUTHORIZATION BY PHONE TO CORRECT <u>Print Galdress</u> DATE 12/4/01

OC. EXAM Day w/wte

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 21, 2001

PATRICIA PARDO 5700 MEMORIAL HWY STE 205 TAMPA, FL 33615

SUBJECT: 1MUNDO, INC. Ref. Number: W01000026748

We have received your document for 1MUNDO, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6933.

Letter Number: 501A00062510

Dale White Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

FILED

Articles of Incorporation SECRETARY OF STATE TALLAHASSEE FLORIDA 1MUNDO, INC.

THE UNDERSIGNED, in order to form a corporation for the purposes hereinafter stated, under and pursuant to the provisions of General Corporation Law of the State of FLORIDA, hereby certifies as follows:

ARTICLE I CORPORATE NAME

The name of this corporation is 1MUNDO, INC..

Principal address: 5700 Memorial Hwy Ste 205, Tampa, FL 33615

ARTICLE II INITIAL OFFICE AND AGENT

The address of this Corporation's initial registered office and the name of its original registered agent at such address is:

PATRICIA PARDO 5700 MEMORIAL HWY., SUITE 205, TAMPA, FLORIDA 33615

ARTICLE III PURPOSES

The purpose of the Corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Laws of the State of FLORIDA.

ARTICLE IV STOCK

The aggregate number of shares which this Corporation shall have authority to issue is 7,500 shares of \$0.10 par value stock.

ARTICLE V CORPORATION BY-LAWS

The Board of Directors is authorized and empowered to make, alter, amend, and rescind the By-Laws of the corporation, but By-Laws made by the Board may be altered or repealed, and new By-Laws made, by the stockholders.

ARTICLE VI

Pursuant to the General Corporation Laws of the State of FLORIDA, any and all directors of this Corporation shall not be liable to the Corporation, its shareholders, or any third party for breach of duty of care; such potential liability is hereby eliminated.

ARTICLE VII BOARD OF DIRECTORS

The name and address of each person serving as a member of the initial Board of Directors are:

PATRICIA PARDO 3610 DANA SHORES DR., TAMPA, FLORIDA 33634

VENANCIO PARDO 3610 DANA SHORES DR., TAMPA, FLORIDA 33634

ARTICLE VIII INCORPORATORS

The name and address of the incorporators are:

PATRICIA PARDO 5700 MEMORIAL HWY., SUITE 205, TAMPA, FLORIDA 33615

• =	IN WITNESS WHEREOF, the incornant this 15th day of November	porator(s) has/have hereunto set his/her/their	en e
•	INCORPORATOR(S):		
	Signature	Signature	Service Services
• • •	Signature	Signature	1 - 1, 1, <u>11, 19</u> - 717
	STATE OF Florida COUNTY OF Hillsborough	The same of the sa	d # m - 4 %
	On the 15th day of Novembefore me Pour; cia Pour instrument, who duly acknowledged to me to	the signer(s) of the within that they executed the same.	شانيا د ا
-		Theresal Bifles Notary Public	
		1302 W Sligh Aver Residing at:	·
		My Commission expires Commission expires Commission expires Commission exp. AUC. MY COMMISSION EXP. AUG.	ORIDA. 498

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, 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 is:	٠		
* 1 Mundo Inc.			
,			
2. The name and address of the registered agent and office is:			
* Patricia Pardo			
(Name)	SEC	010	-
* 5700 Memorial Highway Suite 205	AHA AHA	DEC -	7
(P.O. Box NOT acceptable)	SSEE SSEE	‡= 7=	T
the same of the sa			

(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 Date