POLOOOII8588

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

400004725334--6 -12/14/01-01020-016 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: CLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

STO.00 Filing Fee

0 🖵 \$78.75 e Filing Fee & Certificate of Status \$78.75
Filing Fee
Certified Copy
Certificate of Status

ADDITIONAL COPY REQUIRED

Lavielle Name (Printed or typed) FROM: 9570 NW 32 Place PM 3: 02 MIAMI, F. 3314 City, State & Zip 305) 642-0605 Daytime Telephone number

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

T. Burch DEC 1 4 2001

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be:
Detalles, Corp
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
9570 NW 32 Place MIAMI, FI 33147
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
PROFESSIONAl Services
ARTICLE IV SHARES The number of shares of stock is:
100
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):
Myrian Lavielle 9570 NW 32 PL MIAMIA 33147 (President)
Juan Lavielle 9570 NW 32PL MIANI FI 33147 (Vise President)
ARTICLE VI     REGISTERED AGENT       The name and Florida street address of the registered agent is:
MyRiam Lavielle 9570 NW 32 PL MIAMI FI 33147
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ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Angola Gonzalez 2140 W Alaşlan St MIMMI 433135
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Signature/Incorporator