S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2106 ₩alk in Certified Copy Mail out Will wait Photocopy Certificate of Status AMENDMENTS NEW FILINGS Amendment **Profit** Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partsey Name Reservation Reinstatemen Trademark Other Examiner's Initials

CR2E031(9/92)

#### ARTICLES OF INCORPORATION

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:

LATIN MERCHANDISE CORP.

# ARTICLE II - PRINCIPAL OFFICE

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

4890 S.W. 75 AVE. Miami, FLORIDA 33155

### 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:

JOSE MARIA CORREA 4890 S.W. 75, AVE. MIAMI, FLORIDA 33155

### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

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**ARTICLE VI- DIRECTOR(S)** 

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

JOSE MARIA CORREA PRESIDENT

JULIO ALBERTO MIGLIOZZI VICE PRESIDET

4890 S.W. 75 AVE.

MIAMI, FLORIDA 33155

# 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

01DEC 17 PMI SECRETARY OF STALLAHASSEE FL