P01000119357

December 14, 2001

State of Florida Division of Corporation P.O. Box 6327 Tallahassee, FL. 32314

Gentlemen:

Attached please find articles of Incorporation for KALEI'S CORPORATION, and a check for \$78.75 to cover for the incorporation fees and a certified copy of the Incorporation.

Please address any correspondence to the following:

Ileana Ruano 1295 S.W. 143rd Place. Miami, FL. 33184-3501 (305) 223-9734

Thanking you in advance for your prompt response.

200004728832--7 -12/17/01--01073--010 *****78.75 ******78.75

Sincerely,

Ileana Ruano

2001 DEC 17 AM II: 1:
SECKLIARY OF STATE
FALLAHASSEE FLORID

£ 12/18/01

CERTIFICATE OF INCORPORATION OF KALEI'S CORPORATION

2001 DEC 17 AMII: 13

SECRETARY OF STATE TALLAHASSEE FLORIDA

WE, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida

- 1. The name of the corporation shall be KALEI'S CORPORATION, and its existence shall be perpetual.
- 2. The general nature of the business to be transacted shall be managing of real estate property and for all legal purposes of incorporation under the laws of the State of Florida.
- 3. The capital stock of the corporation shall consist of five hundred (500) shares, with a par value of one dollar per Share (\$1.00)
- 4. The amount of capital with which this corporation shall begin business is not less that ONE HUNDRED DOLLARS (\$100.00).
- 5. The principal office of this corporation shall be located at 1295 S.W. 143^{to} Place, Miami, FL 33184-3501
- 6. The number of directors shall be at least one (1), and the name and post office address of the first Board of Directors and office are:

NAME OFFICE POST OFFICE ADDRESS

ILEANA RUANO President/Secretary 1295 S.W. 143rd Pl, Miami, FL 33184-3501

7. The name and post office address of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefore, the proceeds of which will amount to not less than ONE HUNDRED DOLLARS (\$100.00), are as follows:

NAME NO. OF SHARES CONSIDERATION

\$100.00

ILEANA RUANO 100

8. IELANA RUANO, is hereby designated as the Registered Agent for the corporation and 1295 S.W. 143rd Pl., Miami, FL 33184-305.

IN WITNESS WHEREOF, The undersigned hereby subscribe to this Certificate of
Incorporation at Miami, Florida this/4_ day of DECEMBER, 2001, for the uses and
purposes aforesaid.
Witness Witness Witness
STATE OF FLORIDA) COUNTY OF MIAMI-DADE)
Subscriber(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they subscribe thereto, and did so for the uses and purposes therein contained.
Affirmed and signed before me, on this _/4 day of <u>DECEUBER</u> , 2001, by ILEANA RUANO, who is personally known to me.
ILEANA RUANO, personally appeared before me at the time of notarization, and after being given the oath, acknowledged signing the foregoing acceptance.
A1900 DOAZ Cluber Ver
(Printed or Typed Name) Notary Public
Commission Expiration Date & Commission Number:
(SEAL)

Alicia Diaz
MY COMMISSION # DD004776 EXPIRES
March 28, 2005
BONDED THRU TROY FAIN INSURANCE, INC.

2001 DEC 17 AMII: 13

SECHEVARY OF STATE TALLAHASSEE FLORIDA

CERTIFICATE OF DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 28.091, Florida Statues, the following is submitted:

KALEI'S CORPORATION

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Miami, State of Florida, has named ILEANA RUANO, located at 1295 s.w. 143nd Pl., Miami, FL 33184-3501, as its Agent to accept service of process within Florida.

CORPORATE OFFICER
TITLE: PRESIDENT
DATE: 12-14-01

I HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

RESIDENT AGENT

DATE: <u>/2-/4-0/</u>