

P02000011050

TRANSMITTAL LETTER

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

APPROVED  
AND  
FILED  
02 JAN 31 AM 10:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: LUZ Education & Training, Inc.

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

\$87.50 Filing Fee, Certified Copy & Certificate of Status (Additional Copy required)

FROM: INOEL MIRANDA  
444 LOS ALTOS WAY # 103  
ALTAMONTE SPRINGS, FL.  
32714  
(407) 862-21-92

NOTE: Please provide the original and one copy (1) of the article.

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-01/31/02--01043--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

RECEIVED  
02 JAN 31 AM 10:03  
DIVISION OF CORPORATIONS

*[Handwritten signature]*  
1/31

## 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:

LUZ Education & Training, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Ocean Village 5 & 6  
S. Atlantic Ave. & Matthews Ave.  
New Smyrna Beach, FL. 32169

### ARTICLE III PURPOSE

The purpose for which the corporation is organize  
is:

Education & Training Services for Professionals,  
Young Adults, Teenagers & Kids.  
Merchandising  
Import & Export

### ARTICLE IV SHARES

The number of shares of stock is:

100 shares

### ARTICLE V INITIAL OFFICERS/DIRECTORS

Inora Miranda: President  
Inoel Miranda: VP - General Manager  
José Daniel Medina: Treasurer  
Inoisel Miranda: Secretary

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the register agent is:

Inoel Miranda  
444 Los Altos Way # 103  
Altamonte Springs FL, 32714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

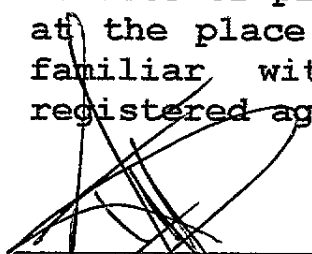
Inoel Miranda  
444 Los Altos Way # 103  
Altamonte Springs FL, 32714

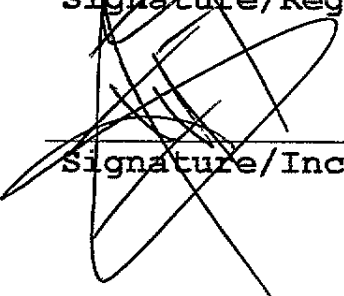
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

\*\*\*\*\*  
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.

 01/31-02  
\_\_\_\_\_  
Signature/Registered Agent/Date

 01/31-02  
\_\_\_\_\_  
Signature/Incorporator/Date