OF PE US DNI (US Jumery) AND SERVICE INC. (Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101
(Address)

CORAL GABLES, FL 33134 305-444-4994 (City, State, Zip) (Phone #)

300005153543--U -03/25/02--01048--806 *****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

ON ORATION MAINTENANCE	
Distribuidoro	a Latina de Alimentos, Corp.
(Corporation Name)	(Document #)
(Corporation Name)	(Document #) (Document #) Certified Copy
(Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	(Document #) (Document #) (Certified Copy Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal 500 2
Other	Merger
<u> </u>	2 2 2
OTHER FILNGS	Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign
Annual Report	QUALIFICATION
Fictitious Name	
Name Reservation	Limited Partnership Reinstatement
	Trademark
	Other
CR2E031(9/92)	Examiner's Initials
44.44.400 C (71.74)	

ARTICLES OF INCORPORATION OF

Distribuidora Latina de Alimentos, Corp.

THE UNDERSIGNED has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

Distribuidora Latina de Alimentos, Corp.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:

 To have perpetual succession by its corporate name.

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 1,000 shares, having an individual par value of \$10.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

Each of the Shareholders covenants and agrees that he will not sell, assign, transfer, donate or otherwise dispose of, or pledge, hypothecate or otherwise encumber any of the shares of the Corporation's stock except upon the prior written consent of the remaining Shareholders.

ARTICLE VI

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

Elsa C. Rios 1800 W, 49th St, Suite 301 Hialeah, FL 33012 The principal address shall be: 10491 Mateo Court Boca Raton, FL 33496

ARTICLE VII

The initial Board of Directors shall consist of a total of two (2) people, and the name and address of the person who is to serve as initial director are:

PRESIDENT / TREASURER
MARLENE DE AROCHA
10491 Mateo Court
Boca Raton, FL 33496

VICE-PRESIDENT / SECRETARY EDGAR MOLINA 10491 Mateo Court Boca Raton, FL 33496

The name and address of the incorporator executing these Articles of Incorporation is: ELSA C. RIOS 1800 W, 49th Street, Ste. 301 Hialeah, FL 33012

IN WITNESS WHEREOF, the under Articles of Incorporation this 22 day of	ersigned i	ncorporate March	or has	(ve) exe 20 <u>02</u> .	ecuted	these
<u>E</u> oundi		, d	इ :			
STATE OF FLORIDA		<i></i>				
COUNTY OF DADE						
BEFORE ME, a notary public authorize county set forth above, personally Marlene and known by me to be the person (Incorporation, and he (they) acknowledge Articles of Incorporation. IN WITHNESS WHEREOF, I have he in the state and county aforesaid, this	e de Aroc (s) who ge before ereunto se	tha and E executed me that	dgar M the fo he (th	Iolina, k regoing iey) exe fixed my	Article cuted	o me es of those
	NOTAL AT LA	RY PUBL RGE	IC, STA	ATE OF	FLOR	DΑ

My Commission Expires:

<u>CERTIFICATE OF DESIGNATION</u> <u>REGISTERED AGENT / REGISTERED OFFICE</u>

Pursuant to the provisions of sections 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:	
Distribuidora Latina de Alimentos, Corp.	
2. The name and address of the registered agent and office is:	
Elsa C. Ríos	OZ SI TAL
(NAME)	02 MAR 25 SECRETARY ALLLAHASSI
	R 2!
1800 W, 49th Street, Suite 301	
(P.O.BOX NOT ACCEPTABLE)	
	REAL SO
Hialeah, FL 33012	7F 0
(CITY/STATE/ZIP CODE)	

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.