

OFFICE USE ONLY

**EXPRESS CORPORATE FILING SERVICE INC.**  
(Requestor's Name)

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

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

OFFICE USE ONLY

FILED  
02 APR 16 PM 11:00  
RECEIVED  
02 APR 17 PM 12:31  
TALLAHASSEE FLORIDA  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

1. Andes Development Company, INC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-04/17/02--01062--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**OF**  
**ANDES DEVELOPMENT COMPANY, INC.**

**FILED**  
02 APR 16 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of the corporation shall be:

**ANDES DEVELOPMENT COMPANY, INC.**

The principal place of business of this corporation shall be:

**16091 Blatt Boulevard, Suite # 402**  
**Weston, Florida 33326**

**ARTICLE II - NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III - CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

ONE THOUSAND SHARES with a \$1.00 par value.

#### **ARTICLE IV - TERM OF EXISTENCE**

This corporation is to exist perpetually.

#### **ARTICLE V - OFFICERS DIRECTORS**

The name(s) and street address (es) of initial officer(s) and directors(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

Ilan Cohen  
16091 Blatt Boulevard, Suite # 402  
Weston, Florida 33326

Fernando Gomez  
16091 Blatt Boulevard, Suite # 402  
Weston, Florida 33326

Abi Furman  
16091 Blatt Boulevard, Suite # 402  
Weston, Florida 33326

#### **ARTICLE VI - INCORPORATOR (S)**

The name(s) and street address (es) of the incorporator(s) to these articles of incorporation is (are):

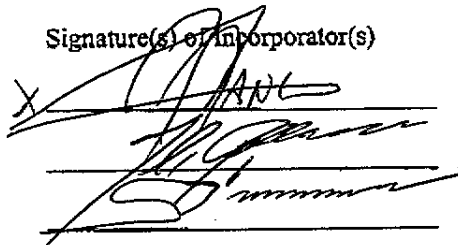
Ilan Cohen  
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Weston, Florida 33326

Fernando Gomez  
16091 Blatt Boulevard, Suite # 402  
Weston, Florida 33326

Abi Furman  
16091 Blatt Boulevard, Suite # 402  
Weston, Florida 33326

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this \_\_\_\_\_ day of \_\_\_\_\_, 2002.

Signature(s) of Incorporator(s)

X 

**CERTIFICATE DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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: ANDES DEVELOPMENT COMPANY, INC.
2. The name and address of the registered agent and office is:

Ilan Cohen  
16091 Blatt Boulevard, Suite # 402  
Weston, Florida 33326

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 IF FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE 

DATE 3 20 02

**FILED**  
02 APR 16 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA