

# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

: FAS-T CORP. AGENTS, INC. Account Name

Account Number : 071001002335 Phone {305}599-0839 Fax Number : (305)716-0346

# FLORIDA PROFIT CORPORATION OR P.A.

ALLACELL OF MIAMI, CORP.

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Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75







# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 7, 2002

FAS-T

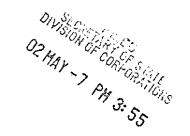
SUBJECT: ALLACELL REF: W02000012979

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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## ARTICLES OF INCORPORATION

OF

ALLACELL OF MIAMI, CORP.

#### ARTICLE I

The name of the Corporation is:

ALLACELL OF MIAMI, CORP.

#### ARTICLE II

The period of its duration is perpetual.

#### ARTICLE III

The purpose for which this corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under the Florida Corporation Act.

#### ARTICLE IV

The Corporation's principal office is located at:

4342 Mahogany Ridge Drive Weston, Florida 33331

#### ARTICLE V

The aggregate number of shares which the corporation shall have authority to issue is 1000 of the par value of ONE DOLLAR (\$1.00) each.

Prepared by:

MANUEL M. RODRIGUEZ-FIOL, ESQ. 782 N. W. 42<sup>nd</sup> Avenue, Suite 530 Miami, FL 33126 (305) 448-0012

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#### ARTICLE VI

The corporation will not commence business until it has received for the issuance of shares consideration of the value of: \$100.00 consisting of money, labor done or property actually received.

#### ARTICLE VII

The street address of its initial registered offices is: 4342 Mahogany Ridge Drive, Weston, Florida, 33331, and the name of its initial registered agent at such address is ALICIA GRILLET.

#### ARTICLE VIII

The number of directors constituting the initial board of directors is 2 and the name(s) and addresses of the person or persons who are to serve as directors until the first annual meeting of the shareholders or until their successors are elected and qualified are:

	Name/Position	Address
ALICIA GRILLET	Director	4342 Mahogany Ridge Drive Weston, FL 33331
MIGUEL ALVAREZ	Director	4342 Mahogany Ridge Drive Weston, FL 33331

#### ARTICLE IX

The name and address of each incorporator is:

ALICIA GRILLET

4342 Mahogany Ridge Drive Weston, FL 33331

[THIS SPACE LEFT BLANK INTENTIONALLY]

#### ARTICLE X

The name and address of the person(s) signing these articles is (are):

ALICIA GRILLET

4342 Mahogany Ridge Drive Weston, FL 33331

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 3024 day of 2002.

ALICIA GRILLET

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, a notary public authorized to take acknowledgments in the State and County set forth above, personally appeared ALICIA GRILLET, [ ] known to me personally or [ ] who produced a valid identification, and who executed the foregoing Articles of Incorporation in my presence.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 2st day of Opici. 2002.

NOTARY PUBLIC

OFFICIAL NOTATY SEAL

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COMMITTION FO CUTSULA

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## CERTIFICATE OF 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:

ALLACELL OF MIAMI, CORP.

The name and address of the registered agent and office is: 2.

ALICIA GRILLET

4342 Mahogany Ridge Drive Weston, FL 33331

Signature:

ALICIA GRILVET

Title: Registered Agent

Date: 30 M day of Q

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 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: 30 day of Q