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

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SOSA & PEREZ INC

Enclosed is an original and two (2) copies of the articles of incorporation and a check for

\$70.00 Filing Fee

__⊠ \$78.75 Filing Fee

& Certified Copy

\$78.75

\$87.50

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate

(ADDITIONAL COPY REQUIRED)

FROM:

Nellie Akalp

Name

30141 Agoura Rd., Suite 205

Address

Agoura Hills, California 91301

City, State & Zip

818-879-9079

Daytime Telephone number

500005728805--- (-06/10/02--01056--013 ******78.75 *****78.75

2002 JUN 10 AM 10: 38
SECRLIARY OF STATE
TAIL AHASSEE FLORIDA

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

Jul11/02

ARTICLES OF INCORPORATION OF SOSA & PEREZ INC

	porator, for the purpose of f		ınder the Florida busi	iness Corporation
Act, hereby adopts the	following articles of incorpo	oration.		2002 Fall
ADDICT E	374367			2.5
ARTICLE I	<u>NAME</u>	`	÷ .	= € ⊆ •
The name of the Corp	poration shall be: SOSA a	& PEREZ INC		LAHASSE CHE LARY
ARTICLE II	PRINCIPAL OF	FICE		
The principal place o	f business and mailing ad	ldress of this corpora	tion shall be:	AM 10: 38 OF ISTATE
9701 Hammo Miami, Flori	ocks Blvd., #A203, da 33190			D _A
ARTICLE III	SHARES			
The number of shares par value per share.	s that this corporation is a	uthorized to have our	tstanding at any one	time is: 2 at \$0.0
ARTICLE IV	INITIAL DIRECT			
The name(s) and add	ress(s) of the initial Direc	ctor(s) is/are:		
Luis F. Sosa 9701 Hammo Miami, Flori	ocks Blvd #A203 da 33190			
ARTICLE V	INITIAL REGIST	ERED AGENT A	AND STREET A	IDDRESS
The name and Florida	a street address of the init	tial registered agent is	s:	
Luis F. Sosa 9701 Hammo Miami, Florio	ocks Blvd., #A203, da 33190			• • • • • • • • • • • • • • • • • • •
ARTICLE VI	INCORPORATO.	R		
The name and addres	s of the incorporator to th		poration is:	
3.7-115- A 11				
Nellie Akalp				
	a Rd., Suite 205 , California 91301			
Agoula fills	, Camornia 91501			
العالم	alo		5.21.02	
Nellie A	kalp, Incorporator	_	Date	
place designated in this capacity. I further agre	registered agent and to according certificate, I hereby accept to comply with the provisions, and I am familiar with a	t the appointment as regions of all statutes relat	gistered agent and agr ting to the proper and	ree to act in this complete
Aus	I Soca	- 5-	31-02	

Date

Luis F. Sosa, Registered Agent