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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FILED
02 JUN 18 PM 2:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

LANSING-DREIDEN, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION
OF
LANSING-DREIDEN, INC.

The undersigned incorporators desire to form a corporation pursuant to Chapter 607, Florida Statutes and hereby adopt the following articles of incorporation for such corporation.

ARTICLE I

NAME: *The name of the corporation shall be:*

LANSING-DREIDEN, INC.

ARTICLE II

PURPOSE AND POWER: *The purpose for which the corporation is formed is to engage in any activity and business permitted under the laws of the State of Florida.*

ARTICLE III

PRINCIPAL OFFICE: *The address of the corporation's principal office shall be:*

**2510 S.W. 27 AVE. #101
MIAMI, FL. 33133**

ARTICLE IV

INCORPORATOR(S): *The name and address of the incorporator(s) is*

(are):

**DIEGO DUENAS
2510 S.W. 27 AVE. #101
MIAMI, FL. 33133**

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ARTICLE V

DIRECTORS: The number of directors constituting the corporation's initial Board of Directors is (are) **one** whose name and addresses is (are):

DIEGO DUENAS
2510 S.W. 27 AVE. #101
MIAMI, FL. 33133

OFFICERS:

President: **DIEGO DUENAS** **2510 S.W. 27 AVE., #101 MIAMI, FL. 33133**

ARTICLE VI

SHARES OF STOCKS: The aggregate number of shares of stock the corporation is authorized to issue is ****100**** shares which shares shall be common stock having ****\$1.00**** par value.

ARTICLE VII

DURATION: The duration of the corporation shall be perpetual.

ARTICLE VIII

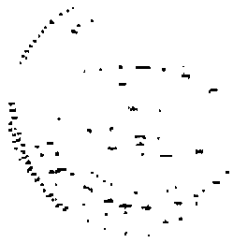
REGISTER AGENT: The name and address of the permanent registered agent is:

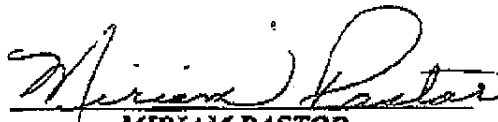
ANGEL D. CORDOVA
780 N.W. 42 AVE. #416
MIAMI, FL. 33126

IN WITNESS THEREOF, We have executed these articles of Incorporation in Miami, Miami-Dade County, Florida on this 14th day of June, 2002.

x 

SWORN AND SUBSCRIBED before me on this 14th day of June, 2002.




MIRIAM PASTOR
NOTARY PUBLIC, State of Florida
My Commission CC855509
Expires August 25, 2003

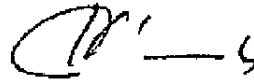
*In compliance with section 607.034 of the Florida Statutes, the following is submitted:
desiring to organize or qualify under the laws of the State of Florida, with its principal
place of business in the City of **MIAMI** County of **MIAMI-DADE** State of Florida has
name **ANGEL D. CORDOVA** located at **780 N.W. 42 AVE. #416, MIAMI, FL** as its
agent to accept service of process within the State of Florida.*

*Mailing address is: 780 N.W. 42 AVE. #416
MIAMI, FL. 33126*

ACKNOWLEDGMENT

*Having been named to accept service of process for the above mentioned corporation,
at the place designated in this Certificate, I hereby am familiar with and accept the duties
and responsibilities as register agent for said corporation and agree to act in this capacity,
and further agree to comply with the provisions of all Statutes relative to the proper and
complete performance of my duties.*

Dated this 14th day of June, 2002.



**ANGEL D. CORDOVA
REGISTER AGENT**

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