POAOOOTHITI

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

LOOOD6224711--E -07/05/02--01054--018 *****78.75 *****78.75

SUBJECT: BOCADITOS Y ALGO MAS INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certifica Status	te of
Printed or typed)		-
	#205	i
33172 State & Zip		2002 JUL -5 AM 10: 0 SECHLIARY OF STATE FALLAHASSEE FLORID
	Filing Fee & Certified Copy ADDITIONAL CO Printed or typed) CTL LANE Address	Filing Fee, & Certified Copy Certified Co & Certified Co & Certifica Status ADDITIONAL COPY REQUIRE PLICENO Printed or typed) CTL LANE # 205 Address A 33172 State & Zip

NOTE: Please provide the original and one copy of the articles.

7/9/02

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	THE RESERVE STATES
ARTICLE I NAME	2002 JUL -5 AM 10: 02
The name of the corporation shall be:	ZOUZ JUL O HITTO
BOCADITOS Y ALGO HAS INC.	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	_
8695 W.W. 6th LANE #205, MIAMI, FI	_ 33172
ARTICLE III PURPOSE	to the state of
The purpose for which the corporation is organized is:	
CATERING, FOOD SERVICE	
ARTICLE IV SHARES The number of shares of stock is:	
1000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	
-DULCE MARIA BRICERO 8695 N.W. 6th LANE #205, MIAMI, FLORI DIRECTOR	DA 33172
ARTICLE VI REGISTERED AGENT	e.
The name and Florida street address of the registered agent is:	
-DULCE MARIA BRICEDO 8695 N.W 6Th LANE #205,MAMI, FLORI	DA 33172
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	- · · · · · · · · · · · · · · · · · · ·
-DULCE MARIA BRICEDO	47:72
8695 N.W 6th LANE #205, MIAMI FLORIT	× 33172
******************************	*******
Having been named as registered agent to accept service of process for the above stated corpora	ation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in	inis capacity
XIII accileon	7/3/2002
Signature/Registered Agent	Date
Affol Saccelever	7/3/2002
Signature/Incorporator	Date