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☐ PICK-UP ☐ WAIT ☐ MAIL

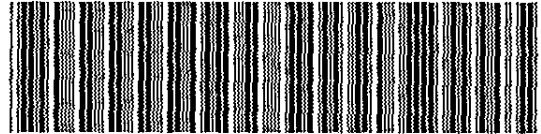
(Business Entity Name)

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02 DEC 11 AM 11:40
DEPARTMENT OF REVENUE
STATE OF MISSISSIPPI

SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 DEC 12 PM 12:59

WCH 31722

L. SMITH DEC 13 2002

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LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

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

1. TR PRODUCE COMPANY
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

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☒ Certified Copy

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☐ 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

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

December 11, 2002

LAZARUS

SUBJECT: TR PRODUCE COMPANY
Ref. Number: W02000034726

We have received your document for TR PRODUCE COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist
New Filing Section

Letter Number: 702A00065560

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02 DEC 12 PM 3:24
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I - NAME

The name of the corporation shall be:

TR PRODUCE COMPANY

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

1766 NW 82nd Avenue
Miami, Florida 33166

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Million Shares
1,000,000

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Joaquin E. Tomas
1766 NW 82nd Avenue
Miami, Florida 33166

02 DEC 12 PM 1:00

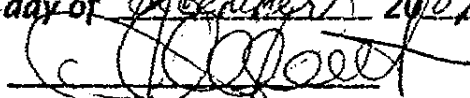
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Alfredo Robert
1746 NW 82 Avenue
Miami, Florida 33166

The undersigned incorporator has executed these Articles of Incorporation this 12 day of December 2002


Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

J.E. Tomas
PO BOX 143575
Coral Gables, Florida 33114

(V.P.)

Alfredo Robert
4004 Estepona Avenue
Miami, Florida 33178

(P)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 DEC 12 PM 1:00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature