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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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

N M B BABY FOOD PLACE, INC.

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

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ARTICLES OF INCORPORATION
OF

The undersigned incorporator (s), for the purpose of forming a corporation under the Florida general Corporation Act, hereby adopt(s) the following Articles of incorporation.

Article I NAME

The name of the corporation shall be:

N M B BABY FOOD PLACE, INC.

The principal place of business of this corporation shall be:

1549 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162

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ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value this corporation is authorized to have outstanding at any one time is : 1000 shares.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

RUTH CALIXTE
1015 NW 116TH STREET
MIAMI, FL 33161

President

JOEL CALIXTE
1015 NW 116TH STREET
MIAMI FL 33161

Tresory

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (are):

RUTH CALIXTE
1015 NW 116TH STREET
MIAMI FL 33161

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 11th day of February 2003.

Signature(s) of Incorporator

Ruth Calixte

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:

N M B BABY FOOD PLACE, INC.

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

RUTH CALIXTE

(P O BOX NOT ACCEPTABLE)

1015 NW 116TH STREET
MIAMI, FL 33161

(CITY/STATE/ZIP)

Signature

Ruth Calixte

Title

President

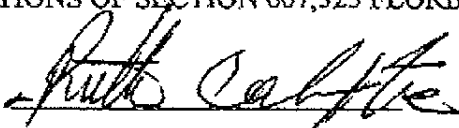
Date

February 11, 2003

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HAVING BEEN NAMED TO ACCEPT 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

February 11, 2003

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