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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Trie	cky Choppers Inc.				
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:		
-					
\$70.00		□ \$78.7 <i>5</i>	☑ \$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
			Status		
	,	ADDITIONAL CO	PY REQUIRED		
	Arnie Gonzalez				
FROM:					
Name (Printed or typed)					
5874 SW 69th Street					
	Address				
	Miami, FL 33143				
	City, State & Zip				
(
(305) 216- 7565					
	Daytime Telephone number				

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

70 0 1

ARTICLES OF INCORPORATION OF TRICKY CHOPPERS INC.

The undersigned hereby agree(s) to organize a corporation under the laws of the State of Florida, with the following Articles of Incorporation.

ARTICLE I NAME

The corporate name shall be:

Tricky Choppers Inc.

ARTICLE II EXISTENCE

The corporation shall have perpetual existence.

ARTICLE III <u>PURPOSE</u>

The corporate purpose is to conduct all lawful business and it shall possess all powers now and hereafter conferred by the laws of the State of Florida and the United States upon corporations.

ARTICLE IV AUTHORIZED CAPITAL STOCK

The amount of capital stock authorized is two thousand (2,000) shares with \$1.00 par value.

ARTICLE V PRINCIPAL OFFICE

The post office address of the principal office of the corporation is: 5874 SW 69th Street, Miami, Florida 33143, or at any other location that the Board of Directors chooses to designate.

ARTICLE VI INITIAL REGISTERED AGENT

The initial Registered Agent of the corporation is:

ARNIE GONZALEZ and the street address of the registered office is:

5874 SW 69th Street, Miami, Florida 33143

ARTICLE VII INTIAL BOARD OF DIRECTORS

The business of the corporation shall be managed by a Board of Directors consisting of not fewer than one (1) person, the exact number to be determined from time to time in accordance with the by-laws. The name(s) and address(es) of the first Board of Directors who shall serve until the first meeting of the shareholders or until their successors are elected and qualified shall be:

NAME(S)

ADDRESS(ES)

Arnie Gonzalez

5874 SW 69th Street Miami, Florida 33143

ARTICLE VIII POWERS OF DIRECTOR(S)

The Director(s) shall exercise all powers conferred by law.

ARTICLE IX INDEMNIFICATION

The corporation shall indemnify any and all of its directors or officers against losses and expenses actually and necessarily incurred by them in connection with the defense of any suit which they are parties to by reason of their acts while in their corporate capacity.

ARTICLE X AMENDMENTS

The corporation reserves the right to amend, alter, change or repeal any or all provisions of the Articles of Incorporation in the manner now or hereafter prescribed by Florida Statutes.

ARTICLE XI INCORPORATOR

The name(s) and address(es) of the Incorporator(s) of the corporation is/are as follows:

<u>NAMES</u> <u>ADDRESSES</u>

Arnie Gonzalez 5874 SW 69th Street Miami, Florida 33143

IN WITNESS WHEREOF, the undersigned, being the original incorporator of the corporation, has executed these Articles of Incorporation this _______ day of February, 2003.

ARNIE GONZALEZ Incorporator

FEB 18 PM (

ACKNOWLEDGMENT

Having been named as registered agent and to accept service of process for the above stated corporation, at the place designated in these Articles of Incorporation, 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, relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

ARNIE GONZALEZ

Registered Agent

STATE OF FLORIDA)
)ss:
COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned authority, personally appeared Arnie Gonzalez, to me well known and known to me to be the person described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State aforementioned this day of February, 2003.

NOTARY PUBLIC State of Florida

OFFICIAL NOTARY SEAL
ISABEL M. VALCARCE

COMMISSION OF PART 287 mm sioned MY COMMISSION EXP. DEC. 10, 2005

Personally known _____ or produced identification _____ Type of Identification Produced _____

My Commission Expires: