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From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**DONA FLOR CIGARS, CORP.**

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

March 7, 2003

FAS-T CORP. AGENTS, INC.

SUBJECT: DONA FLOR CIGARS, CORP.  
REF: W03000006530

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

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# ARTICLES OF INCORPORATION OF

## DONA FLOR CIGARS, CORP. (name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) Competent to contract, hereby form a corporation under the laws of State of Florida.

### ARTICLE I - CORPORATE NAME

The name of the corporation is: DONA FLOR CIGARS, CORP.

### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities permitted under the laws of the United States and the State of Florida.

### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Five hundred shares (500) of five Dollar (s) (\$ 5.00 ) par value common stock, which shall be designated "Common Shares".

### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and name of the at office is:

NAME	FLORINDA GONZALEZ				
ADDRESS	327 PALM AVE				
CITY	HIALEAH	STATE	FL	ZIP	33010

The principal office, if known or the mailing address of the corporation is:

NAME	FLORINDA GONZALEZ				
ADDRESS	327 PALM AVE				
CITY	HIALEAH	STATE	FL	ZIP	33010

### ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have THREE (3 director initially. The number of directors may be either increased or diminished from time to time by - laws, but shall never be less than one (1).

The name and addresses of the initial director (s) of the corporation are as follows:

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NAME	FLORINDA GONZALEZ		
ADDRESS	8845 NW 175 STREET		
CITY	MIAMI	STATE	FLORIDA ZIP 33018
NAME	ALEXANDE GIRON		
ADDRESS	8845 NW 175 STREET		
CITY	MIAMI	STATE	FLORIDA ZIP 33018
NAME	DENISE SANDOVAL		
ADDRESS	8845 NW 175 STREET		
CITY	MIAMI	STATE	FLORIDA ZIP 33018
NAME			
ADDRESS			
CITY	MIAMI	STATE	FLORIDA ZIP
NAME			
ADDRESS			
CITY	MIAMI	STATE	FLORIDA ZIP

#### ARTICLE VII - INCORPORATORS

The name and addresses of the incorporators signing theses Articles of Incorporation are as follows :

NAME	FLORINDA GONZALEZ		
ADDRESS	8845 NW 175 STREET		
CITY	MIAMI	STATE	FLORIDA ZIP 33018
NAME	ALEXANDER GIRON		
ADDRESS	8845 NW 175 STREET		
CITY	MIAMI	STATE	FLORIDA ZIP 33018
NAME	DENISE SANDOVAL		
ADDRESS	8845 NW 175 STREET		
CITY	MIAMI	STATE	FLORIDA ZIP 33018
NAME			
ADDRESS			
CITY	MIAMI	STATE	FLORIDA ZIP
NAME			
ADDRESS			
CITY	MIAMI	STATE	FLORIDA ZIP

IN WITNESS WHERE OF, the undersigned subscriber (s) have executed these Articles of Incorporation this 05 day of March, 2003.

PREPARED: SOSA ACCOUNTING TAX SERVICE  
570 EAST 49 STREET  
HIALEAH, FL 33013

(305) 688 - 1716  
(305) 688 - 1714

Florinda Gonzalez (Seal)

Alexander Giron (Seal)

Denise Sandoval (Seal)

\_\_\_\_ (Seal)

\_\_\_\_ (Seal)

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**CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT**

**OF**

**DONA FLOR CIGARS, CORP.**

(name of corporation)

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, to organize under the laws of the State of Florida with its  
registered office as indicated in the Articles of Incorporation.

**AT: 327 PALM AVE**

**HIALEAH, FL 33010.**

**Has named FLORINDA GONZALEZ.**

Located at the aforesaid address, as its Registered Agent to accept service of process  
within this state.

**ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above state  
corporation at the place designated in this certificate, and being familiar with the  
obligations of that position, I hereby accept to act in this capacity, and agree to comply  
with provisions of Florida Law in Keeping open said office.

  
(registered agent)

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