

Florida Department of State

Division of Corporations Public Access System

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Ta:

Division of Corporations

Fax Number

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From:

: YOUR CAPITAL CONNECTION, INC. Account Name

Account Number : 120000000257 Phone

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FLORIDA PROFIT CORPORATION OR P.A.

4 STARS VARIETY PRODUCTS, INC.

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ARTICLES OF INCORPOTION OF 4 STARS VARIETY PRODUCTS JINC.

THE UNDERSIGNED INCORPORATION, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA CENERAL CORPORATION ACT, HEREBY ADOPT THE FOLLOWING ARTICLES OF INCORPORATION,

ARTICLE'I-NAME

The name of the corporation shall be:

4 STARS VARIETY PRODUCTS ,INC.

THE PRINCIPAL OFFICE OF THES CORPORATION SHALL BE:

2490 Huron Circle Kissimme - Florida 34746

ARTICLE IL NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFULL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTY, TERRITORY, OR NATION.

ARTICLE III-CAPITAL STOCK

THE ACCREGATE NUMBER OF SHARES OF STOCK, AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

ENRIQUE DOANDO (PRESIDENT)

ONE HUNDRED (100) SHANES OF COMMON STOCK HAVING A PAR VALUE OF ONR (\$1.00) DOLLAR PER SHARE

ARTICLE IV -TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALY.

ARTICLE V - OFFICERS / DIRECTORS

THE NAME AND ADDRESS OF THE INITIAL OFFICER AND DIRECTOR WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION EXISTENCE OR UNTIL THEIR SUCCESSORS ARE ELECTED ARE:

ENRIQUE OCANDO 2490 HURON CIRCLE KISSIMME - FLORIDA 34746

THE NAME AND STREET ADDRESS OF THE INCORPORATORS TO THESE ARTICLES OF INCORPORATION ARE:

4 STARS VARIETY PRODUCTS ,INC. 2498 HURON CIRCLE KISSIMME - PLORIDA 34746

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IN WITNESS WHEREOF, THE UNDERSIC	NED INCORPORATOR	S HAVE EXECUTED THE	ESE ARTICLES OF
	Brya D	in A	
STATE OF FLORIDA COUNTY OF OSCEOLA THE FOREGOING INSTRUMENT WAS ACKN OF	owledged and swo	rn to before me this	10Th DAY
(S RAL)	NO POLY TUBERO	TATE OF FLORIDA	
Commission 8 DOG174075 Expires 1278/2008 Sonded Satury Booked Satury Commission 8 DOG174075 Expires 1278/2008 Sonded Satury Booked Satury Commission Commi	CERTIFICATE/DASI RECISTERED AGEN	Gnations T/Registered opfice	
fursuant to the requirements of se corporation, organized under thi statement in designation the regist	er laws of the stat	e of florida , submitte	EOF PLOTION C
1- THE NAME OF THE CORPORATION IS:			LAHE MR
2490 HURO	riety products,ind Circle Florida 34746	<u>.</u>	R 26 AM
2- THE NAME AND ADDRESS OF THE REGI	Strred agent 4 offic	if is:	
ENRIQUE O 2490 HURON KISSIMME -			NATE ARIDA
		SIGNATURE OF CORP	ORATE OFFICER ESIDENT
HAVING BEEN NAMED TO ACCEPT SERV PLACE DESIGNATED IN THES CERTIFICA ACREE TO COMPLY WITH THE PROVISK PERFORMANCE OF MY DUTIES AND 1 AC PLORIDA STATUES.	ite, I hereby accept ons of all statutes	TO ACTIN THIS CAPACIT RELATIVE TO THE PROP	ry, and i further er and complete
SIGNATURA COMPORATE OFFICER		DATEJOTh	/ Harch,2008

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