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LAZARUS CORPORATE FIL	ING SERVICE			
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CORPORATION NAME(S) &	DOCUMENT NUMB	EK(S) (il known):		
1. HLMREDOD	USTRIBUL	ION INC.		
(Corporation Name)		(Document #)		
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Section 1		·		
7 NEW FILINGS	AMENDME	NTS		
Profit	Amendment	N		
NonProfit		A Officer/Director		
. Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent			
Domestication	Dissolution/Withdrawal			
Other	Merger			
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Annual Fil Mas	REGISTRATION	V.		
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ARTICLES OF INCORPORATION

03 AUG 26 PM 2: 33

corporation under the Florida Business Corporation Act, hereby adopt(s) ASSEE, FLORID the following Articles of Incorporation

ARTICLE I - NAME

The name of the corporation shall be:

ALFREDO DISTRIBUTION INC

ARTICLE II - PRINCIPAL OFFICE

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

14532 SW 12 LN MIDNI - Flo 3318X

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

José Luis Zaldivar

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles Incorporation is: $ \frac{14\sqrt{3}Z}{\sqrt{3}} = \frac{3}{\sqrt{3}} = $	of TALL	03 A	
Incorporation this Aday of Acos 200 2003 Signature	RETARY OF STATE AHASSEE, FLORIDA	AUG 26 PH 2: 33	FILED
ARTICLE VI- DIRECTOR(S)			
The name(s) and street address(es) of the director(s) to these Artic	cles of		

Olfredo Guedes. PRESIDENT JOSE Luis ZAldivar VICE PRESIDENT ARNELY ZALDIVAR SECRETARY MAYRA O. GOZMAN TRASURE. Incorporation is (are):

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.

Redistered Agent Signature