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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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TRANSMITTAL LETTER

| Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 | | |
|---|--|-------------------------|
| SUBJECT: REGIO ENTERPRISES, INC. (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an original and one (1) copy of the art | ticles of incorporation and | a check for: |
| □ \$70.00 □ \$78.75 Filing Fee Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | & Certificate of Status |
| FROM: ODALYS C. GONZALEZ | e (Printed or typed) | |
| 3111 SW 117th COURT | Address | <u> </u> |
| MIAMI, FL 33175 | , State & Zip | |
| 305-728-2056 | Telephone number | <u>. 147 连</u> |

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

| ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621 | , F.S. (Profit) | |
|--|--|--|
| ARTICLE I NAME The name of the corporation shall be: REGIO ENTERPRISES, INC. | - | . |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3111 SW 117th COURT MIAMI FL 33175 | | g dian re |
| ARTICLE III PURPOSE The purpose for which the corporation is organized: ANY ACTIVITY OR BUSINESS PERMITTED UNDER T STATE OF FLORIDA | | ED STATES AND OF THE |
| ARTICLE IV SHARES The number of shares of stock is: 1000 shares of common stock, \$.01 par value | | , and the second |
| ARTICLE V INITIAL OFFICERS AND/OI List name(s), address(es) and specific title(s): Reinaldo Gonzalez, 3111 SW 117th Court Miami, FI 331 Odalys C. Gonzalez 3111 SW 117th Court Miami, FI 331 | 75, President | <u>-</u> • |
| ARTICLE VI REGISTERED AGENT The name and Florida street address of the registere | ed agent is: | . ⊸r· |
| Odalys C. Gonzalez 3111 SW 117th Court Miami, FI 33175 | - · | O3 NUE SECRET TALLAH! |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: | . <u>.</u> . | 25 PARY OF |
| Odalys C. Gonzalez 3111 SW 117th Court Miamí, Fl 33175 | = =- | D PN 2: 47 E STATE FLORIDA |
| ******************* | | |
| Having been named as registered agent to accept service of pro- certificate, I am familiar with and accept the appointment as reg | ocess for the above stated con istered agent and agree to act | t in this capacity |
| Signature/Registered Agent ODAIUS C | Gran 701=2 | 08/18/03 |
| Signature needs Created Agent Connection | | Date 08/18/03 |
| Signature/Incorporator ODAI4'S C. C. | PONZALEZ | Date |
| | ,- v | |