Electronic Filing Cover Sheet

Public Access System

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000325004 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number : 119990000017 : (305)485-9300 Phone Fax Number : (305)485-1098

FLORIDA PROFIT CORPORATION OR P.A

GOYI DELIVERY SERVICES, CORP.

Certificate of Status	. 0
Certified Copy	1
Page Count	0.5
Estimated Charge	\$78.75

Electronic Filing Manu.

Comporate Filing

Public Access Halp.

ARTICLES OF INCORPORATION

OF

GOYI DELIVERY SERVICES, CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

GOYI DELIVERY SERVICES, CORP.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things VÍZ:

herein mentioned, as fully and to the same extent as natural persons might do. (1) Transact any and all lawful business. (2) Said corporation shall further have powers: To have perpetual succession by its corporate name: Johima del Corral GOYIII 14080 SW 84 AVE 1419mi, Fil. 33155 305) 485 9300. GOYI DELIVERY SERVICES, CORF.

H03 000 325 0043.

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

ALONSO MARIN 7424 SW 82 ST APT # D 120 MIAMI, FL. 33143

The principal office shall be:

7424 SW 82 ST APT # D 120 MIAMI, FL. 33143

The mailing address shall be:

P.O.BOX 833108 MIAMI, FL. 33183

Los 000 325 0043.

Hos 000325,0043

The initial Board of Directors shall consist of a total of TWO (02) persons, and the name and address of the persons who are to serve as initial directors are:

ALONSO MARIN 7424 SW 82 ST APT # D 120 MIAMI, FL. 33143 PRESIDENT

GLORIA M. MARIN 7424 SW 82 ST APT # D 120 MIAMI, FL. 33143

VICEPRESIDENT

The name and address of the incorporator executing these Articles of Incorporation is

ALONSO MARIN 7424 SW 82 ST APT # D 120 MIAMI, FL. 33143

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of incorporation this 24 Day of NOVEMBER 2003.

ALONSO MARIN

A03 000 325 0043.

LO3 000 325004 3 CERTIFICATE OF DESIGNATION

CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

GOYI DELIVERY SERVICES, CORP.

2. The Name and Address of the registered agent and office is

ALONSO MARIN 7424 SW 82 ST APT # D 120 MIAMI, FL. 33143 03 NOV 26 PM 3 38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Dated: NOVEMBER 24, 2003.

Lo3 000 325 0043