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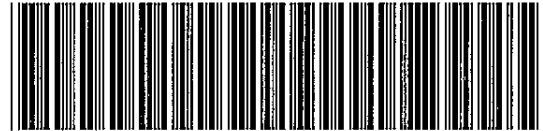
(Business Entity Name)

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**LAZARUS CORPORATE FILING SERVICE**

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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. BEA ENTERPRISES, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Owner's Initials



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

January 12, 2004

LAZARUS

SUBJECT: BEA ENTERPRISES, INC.  
Ref. Number: W04000001482

We have received your document for BEA ENTERPRISES, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole  
Document Specialist  
New Filings Section

Letter Number: 004A00001934

## **ARTICLES OF INCORPORATION**

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of incorporation.

### **ARTICLES I - NAME**

The name of the corporation shall be:

TATA ENTERPRISES, INC.

### **ARTICLES II - PRINCIPAL OFFICE**

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

6705 MIAMI LAKES DR. APT. 201 MIAMI LAKES, FL. 33014.

### **ARTICLES III - SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES

### **ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

BLADIMIR A. DIAZ

6705 MIAMI LAKES DR. APT. 201 MIAMI LAKES, FL. 33014.

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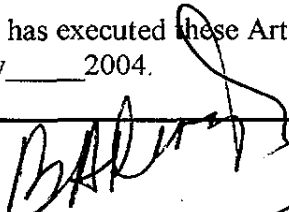
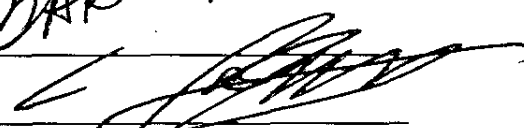
**ARTICLE V - INCORPORATOR**

The name and street address of the incorporator to these Articles of incorporation is:

BLADIMIR A. DIAZ                      PRESIDENT

6705 MIAMI LAKES DR. APT. 201 MIAMI LAKES, FL. 33014

The undersigned incorporator has executed these Articles of incorporation this  
\_\_\_\_ 05 \_\_\_\_ day of \_\_\_\_ January \_\_\_\_ 2004.

  
\_\_\_\_\_  
  
\_\_\_\_\_  
Signature

**ARTICLE VI - DIRECTOR(S)**

The name and street address of the director(s) to these Articles of incorporation is (are):

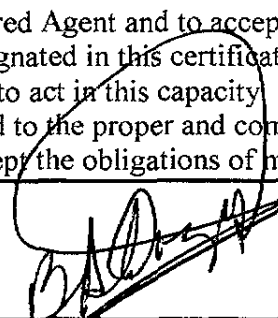
BLADIMIR A. DIAZ                      PRESIDENT

DOLORES ARMENTA                      VICE-PRESIDENT

6705 MIAMI LAKES DR. APT. 201 MIAMI LAKES, FL. 33014

**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.

  
\_\_\_\_\_  
Registered Agent Signature

RECEIVED  
JAN 14 2004  
CLERK OF COURT  
STATE OF FLORIDA