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OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status AMENDMENTS NEW FILINGS Amendment **Profit** Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Examiner's Initials

Other

CR2E031(9/92)

# ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I - NAME

The name of the corporation shall be:

CENALC INC

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II - PRINCIPAL OFFICE

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

P.O.Box 667803 Hiami FL 33166

# 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:

Maero Alcubilla 15221 SW 805T # 602 Miami FL 33193

#### ARTICLE V - INCORPORATOR

	The name and street address of the incorporator to these Articles of Incorporation is:  MARIO ALCUBINA POBOX 66780  AGUSTIN CENTENO HIGHI FL 3310	13	
	APTICLE VI DIRECTOR(S)	SECRETARY OF ST. TALLAHASSEE, FLO	ガニ ガス
- a. - a	The name(s) and street address(es) of the director(s) to these Articles Incorporation is (are):  THARIO ALCUBILLO 50%  AGUSTIN CENTENO 50%  PO Box 667803  Miami #L 33166	ATE ATE ATE	

### 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