10400044546

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(R∈	equestor's Name)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Ac	ldress)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Ad	ldress)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Ci	ty/State/Zip/Phon	e #)
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	PICK-UP	☐ WAIT	MAIL.
Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Bu	isiness Entity Nar	me)
Special Instructions to Filing Officer:	(Do	ocument Number)	
	Certified Copies	Certificates	s of Status
Office Use Only	Special Instructions to	Filing Officer:	
Office Use Only			
		Office Use On	



700039652857

08/11/04--01083--021 **/8.75

DON AUG 11 P D: 19
SECRETARY OF STATE



	í	
OFFICE USE ONLY(DOCUMENT#)		•
LAZARUS CORPORATE FIL	ING SERVICE	
:		
3320 S.W. 87 AVENUE		
MIAMI, FLORIDA (305)552-5973		
		OFFICE USE ONLY
CORPORATION NAME(S) &	DOCHMENT NUMB	ER(S) (if known):
CONTOURNINGS) &		Exc(5) (it known).
1. My DOR US	M CUKP.	(Document #)
2		
(Corporation Name)		(Document #)
3. (Corporation Name)		(Document #)
4. (Corporation Name)		(Document #)
Walk in Pick up time	2.00	Certified Copy
	*	
Mail out Will wait	Photocopy	Certificate of Status
NEW FILINGS	AMENDME	NTS
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Director	
. Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal	
Other	Merger	
OTHER FILNGS	REGISTRATION	W.
Annual Report	QUALIFICATION	
	Foreign	
Fictitious Name		
Fictitious Name Name Reservation	Limited Partnersh Reinstatement	ip

CR2E031(9/92)

ARTICLES OF INCORPORATION

The undersigned subscriber to these Articles of Incorporation, a natural person competent to Contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I - NAME

The name of the corporation shall be: MYDORI USA CORP.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business/mailing address is 6500 N.W. 72 Avenue, Miami,

ARTICLE III - PURPOSE

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE IV - CAPITAL STOCK

The number of shares of stock is 500 shares of common stock of \$1.00 par value per share.

ARTICLE V - INITIAL OFFICERS AND/OR DIRECTORS

This corporation shall have no Officers/Directors initially. The shareholders will manage the affairs of the Corporation until such time Officers/Directors are designated as provided by the Bylaws.

ARTICLE VI - REGISTERED AGENT

The name and street address of the registered agent is:

Marcel Itzcovitch - 6500 N.W. 72 Avenue, Miami, FL 33166

ARTICLE VII - INCORPORATOR

The name and street address of the incorporator is:

Marcel Itzcovitch - 6500 N.W. 72 Avenue, Miami, FL 33166

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature Registered Agent

Signature Mcorporator

8-9-04

8-9-04