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Florida Department of State

Division of Corporations Public Access System

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FLORIDA PROFIT CORPORATION OR P.A.

INVERSIONES CHACUA, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

OF

INVERSIONES CHACUA, CORP.

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

ARTICLE I

The name of this corporation shall be:

INVERSIONES CHACUA, 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 purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers: To have perpetual succession by its corporate name.

ARTICLE IV

The aggregate number of shares that the corporation shall have authority to issue is the total sum of 1000 shares, having an individual par value of \$10.

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.

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ARTICLE V

Each of the Shareholders covenants and agrees that he will not sell, assign, transfer, donate or otherwise dispose of, or pledge, bypothecate or otherwise encumber any of the shares of the Corporation's stock except upon the prior written consent of the remaining Shareholders.

ARTICLE VI

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

Leopoldo G. Rios 2800 Glades Circle, Suite E-102 Weston, FL 33327

The principal address shall be: 3743 San Simeon Circle Weston, FL 33331

The principal mailing address shall be: 3743 San Simeon Circle Weston, FL 33331

ARTICLE VII

The initial Board of Directors shall consist of a total of one (1) person (s), and the name (s) and address (es) of the person (s) who is (are) to serve as initial director (s) is (are):

PRESIDENT/TREASURER/SECRETARY-DIRECTOR MANUEL BELLO 3743 San Simeon Circle Weston, FL 33331

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

LEOPOLDO G. RIOS 2800 Glades Circle, Suite E-102 Weston, FL 33327



ECFS May 31 2005 4:28PM

My Commission Expires:

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IN WITNESS WHEREOF, the undersite Articles of Incorporation this 31st day of	gned incorporator has (have) executed these May 2005.	
0700011		
STATE OF FLORIDA		
COUNTY OF DADE		
BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared MANUEL RELLO, known to me and known by me to be the person (s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before me that he (they) executed those Articles of Incorporation. IN WITHNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this 31st day of		
v		
	NOTARY PUBLIC, STATE OF FLORIDA AT LARGE	

I. The name of the corporation is:

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CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions 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.

INVERSIONES CHACUA, CORP.	
2. The name and address of the registered agent and office	is:
Leopoldo G. Rios	
(NAME)	
2800 Glades Circle Suite E-102	
(P.O.BOX NOT ACCEPTABL	LE)
	<u> </u>
Weston, FL 33327	
(CITY/STATE/ZIP CODE))
HAVING BEEN NAMED AS REGISTERED AGENT OF PROCESS FOR THE ABOVE STATED CORPODESIGNATED IN THIS CERTIFICATE, I HEREBY AS REGISTERED AGENT AND AGREE TO ACT IN TAGREE TO COMPLY WITH THE PROVISIONS OF A TO THE PROPER AND COMPLETE PERFORMANCE FAMILIAR WITH AND ACCEPT THE OBLIGATION REGISTERED AGENT. Signature	DRATION AT THE PLACE CCEPT THE APPOINTMENT HIS CAPACITY. I FURTHER ALL STATUTES RELATING OF MY DUTIES, AND I AM