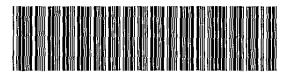
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PICK-UP WAIT MAIL					
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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: La Avile	ena, Inc	ATE NAME - MUSTINGL	UDEISHEFIXY		
	(* NO. 0322 COM 0.2		<u>VVC.US.FN.</u>		
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 □ \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
FROM: Est	ther Sanchez	e (Printed or typed)		05	SIV.
	· Mani	e (Frinted or typed)		MEG	2 2 2 2 3
	2860 Kentucky Street			0	유지 유지
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West Palm Beach, Florida 33406 City, State & Zip				2:57	RAT
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	561.689.2537				_
•	Daytime	Telephone number	-		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

. In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

La Avilena, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2304 South Military Trail, Suite C West Palm Beach, Florida 33415

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Butcher Shop/ Cuts of Meats

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Esther Sanchez President/Director 2860 Kentucky Street West Palm Beach, Florida 33406

Yaris Cabrera

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Esther Sanchez 2860 Kentucky Street West Palm Beach, Florida 33406

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Miguel Reyes 944 Churchill Road West Palm Beach, Florida 33405

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/Incorporator

Date

Date

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