# P0500090075

(Requestor's Name)				
(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:				
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: El Pa	impa Inc			
	(PROPOSED CORPORA	TE NAME - MUST INCL	UD ASURAKI	
Enclosed are an ori	iginal and one (1) copy of the arti	cles of incorporation and	a check for:	
\$70.00 Filing Fee	•	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: _	El Pampa Inc			
Name (Printed or typed)				
1018 10th Lane				
	•	Address		
Lake Worth Florida , 33463				
City, State & Zip				
	561-966-8849			

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

Daytime Telephone number

### ARTICLES OF INCORPORATION

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

# FILED

#### ARTICLE I NAME

The name of the corporation shall be:

El Pampa Inc

2005 JUN 23 PM 4: 16

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Carlos Alberto Mendez, 1018 10th Lane, Lake Worth Florida 33463

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Business may engage or transact any or all lawful activities or business permitter under the law of the Unites States of America, State of Florida, or any other state, country, territory or nation.

#### ARTICLE IV SHARES

The number of shares of stock is:

100

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Carlos Alberto Mendez, 1018 10th Lane, Lake Worth Florida 33463 President, Vice President, Treasurer, Director.

Monica Wibratt 1018 10th Lane, Lake Worth Florida 33463 Secretary

#### ARTICLE VI REGISTERED AGENT

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

Ingrid Datena C/O Cosmopolitan Insurance, 3150 South Congress Ave, Lake Worth, Florida 33461

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Carlos Alberto Mendez, 1018 10th Lane, Lake Worth Florida 33463

*****************	*************
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 arcept the appointment as registere	ed agent and agree to act in this capacity
NOUNDU DITO.	6/15/05
Signature/Registered Agent	Date
Olympia Registrou rigen	/ Date
Runial	6/15/05
Signature/Incorporator	Date