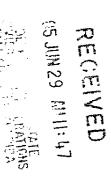
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ARTICLES OF INCORPORATION

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

The name of the corporation shall be:

Quintana's Foliage, Inc.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, State of Florida, and shall have perpetual existence.

ARTICLE III

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

22001 SW 252 Street Homestead, Florida 33031

ARTICLE IV

The general character or nature of the business to be transacted by this corporation is: to engage in any lawful act or activity for which corporations may be organized under the general Corporation Law of the State of Florida.

ARTICLE V

The number of shares which this corporation shall have authority to issue is 100 shares, having an individual par value of \$ 5.00 per share.

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.

ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be:

Remberto R. Quintana 22001 SW 252 Street Homestead, FL 33031

ARTICLE VII

The initial Board of Directors shall consist of a total of 2 person(s) and the name and address of the person(s) who are to serve as an initial Director(s) are:

Remberto R. Quintana	President	22001 SW 252 Street, Homestead, FL 33031
Matilde Quintana	Vice-President	22001 SW 252 Street, Homestead, FL 33031

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 15 days of June 2005.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

RECISTERED ACENT

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