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TRANSMITTAL LETTER.

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

SUBJECT: El Clarin Bugle Informativo Co. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:		
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:		Marlene Duran e (Printed or typed)		· 平 康 · (* * *	
	11865 sw 2	26 st buidling I suite 17 Address	<u> </u>		
		i florida 33175 7, State & Zip		,	
		5-228-8900 - Telephone number	_ -	u vistorio en la	

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:

El Clarin Bugle informativo co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11865 sw 26 st building I suite 17 miami florida 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Conduct any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Onelia Marlene Duran (Owner)

Michel Lopez

(president)

(Vice President)

ELvis Vazquez Alex Sobrino

(Director)

ARTICLE VI REGISTERED AGENT

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

Onelia Marlene Duran

4331 sw 97 pl miami florida 33175

ARTICLE VII INCORPORATOR

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

Onelia Marlene Duran

11865 sw 26 st buildling I suite 17 miami florida 33175

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

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

08/15/2005

11865 sw 26 st building I suite 17 miami florida 33175

Signature/Registered Agent

Date

08/15/2005

Date

Signature/Incorporator