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T. BURCH MAR 8 2006

LAZARUS CORPORATE FILING SERVICE 3320 SW 87 TH AVENUE	۲				
MIAMI, FL 33165 (305) 552-5973					
	Office Use Only				
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):					
1. PATRICIA ESPINOZA JAZAR INC.					
(Corporation Name)	(Document #)				
2(Corporation Name)	(Document #)				
3.					
	(Document #)				
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Examiner's Initials

ARTICLES OF INCORPORATION

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FILE

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 - NAME

The name of the corporation shall be:

PATRICIA ESPINOZA JAZAR INC.

ARTICLE II - PRINCIPAL OFFICE

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

6450 Collins AVE SNITE 1505 MiAMi Beach FL. 33141

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PATRICIAESPINOZA 6450 Co Mins Ave, Suite 1505

MiAMi Beach FI. 33141

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of

Incorporation is: PATRICIA ESPIHOZA 6450 COLLINS AVE SUITE 1505

MPAMP Beach FL 33141 The undersigned incorporator has executed these Articles of Incorporation this ____ day of ____ 20___

Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these

Articles of Incorporation is (are): PATRICIALSpinOZA PRESIDENT JORGE PILO VICE PRESIDENT GOD COLLINS AVE, SUITE 1505 MIAMI Beach. FL 33141

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature