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SECRETARY OF STATI

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CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 305-552-5973 FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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	Office Use Only	
CORPORATION NAME(S) & DO	OCUMENT NUMBER(S), (if known):	
MIRMIPOR.	. C. INC.	en la grande
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Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent	<u> </u>
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OTHER FILINGS	REGISTRATION/QUALIFICATION	
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☐ Annual Report☐ Fictitious Name	Foreign Limited Partnership	= * *
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ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORID,

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 1 - NAME

The name of the corporation shall be:

Miami P.O.R.P. Inc.

ARTICLE II - PRINCIPAL OFFICE

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

720 NW 12 CT Hami F1. 33125

ARTICLE III - SHARES

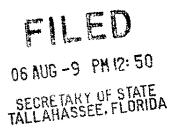
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Flécce ROMERO 720 NW 12 CT Homi Fl. 33125 Eliènce Domeno



ARTICLE V - INCORPORATOR

		s of the incorporator to the	ese Articles of
Incorporation is:	_		\circ
	10 10 -	6 6000	Durago

720 NW 12 CT Miami F1. 33126

The undersigned incorporator has executed these Articles of Incorporation this day of \mathcal{B} 2006.

Signature

ARTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Elierce Lowero Récidente

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