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(Business Entity Name)		
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Special Instructions to Filing Officer:		





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DEPARTMENT OF STATE
DIVISION OF CORPORATION



LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

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MIAMI, FL 33165 (305) 552-5973

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):	
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NEW FILINGS	<u>AMENDMENTS</u>	
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ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:

La Familia Bar Restaurant Corp.

ARTICLE II - PRINCIPAL OFFICE

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

2818 n.w. 22 ave. #2 Miami, FL. 33142

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:

It velisse Charles 2580 s.w. 114 ave. Miami, Fl. 33165

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

The name and street address of Incorporation is:	f the incorporator to these Articles of $C = C + C + C + C + C + C + C + C + C + $	
2580	5.W, 114 aug.	
Mian	ni, FL. 33165	
The undersigned incorporator has executed these Articles of		
Incorporation this day of	200 6.	
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ARTICLE VI- DIRECTOR (S)

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

Tuelisse Charles (President)

Reinaldo Araujo (Vice President)

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