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To:

Division of Corporations

Fax Number : (850)205-0381

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number: I20000000257 Phone : (850)224-8870

Fax Number : (850)224-7047

FLORIDA PROFIT/NON PROFIT CORPORATION

ESM Mesa Enterprises Inc.

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ARTICLES OF INCORPORATION NETARY OF STATE OF OF STATE OF

ESM Mesa Enterprises Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is ESM Mesa Enterprises Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 2801 N.W. 87th Avenue, Miami, Florida 33172

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Lawrence Arnkoff, 9200 S. Dadeland Blvd., Suite 614, Miami, FL 33156

ARTICLE V: OFFICERS & DIRECTORS

The name and address of the initial Officers and Directors of the corporation are:

Moshe Patel, President, 9633 S.W. 122 Street, Miami, Florida 33176

Spurgeon F. Solomon, Vice President, 12790 S.W. 93rd Place, Miami, Florida 33176

Eduardo Martinez, Secretary, 4523 S.W. 64 Avenue, Miami, Florida 33155

ARTICLE VI: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.

The undersigned has executed these Articles of Incorporation this 13th day of November 2006.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the c	orporation is: <u>E</u>	SM ME	SA E	NTERPRISES	Iv.
·		*************************************			
2. The name and stre	eet address of the re	gistered agent and	d office is:		
LAWREN	e ARNK	FF 9:	<u> 2</u> ලල <u> </u>	S. DADELAND	BLYD.
Suite Gi		•	3.5		

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE 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 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.

LAURONCE ACOKOTO A III.