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COVER LETTER

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

SUBJECT:	LUZARDO CORP. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX			
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:	
S70.00 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 OPY REQUIRED 	
FROM:		A. LUZARDO (Printed or typed)		
-		ELYN DRIVE		
		T, FLORIDA, 33897 State & Zip		
		8440789 elephone number		

NOTE: Please provide the original and one copy of the articles.



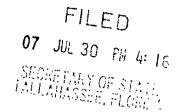
ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

LUZARDO CORP.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

162 JOCELYN DRIVE, DAVENPORT - FL 33897

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOME PRODUCTS RETAIL SALES AND RECRUITING PEOPLE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RAUL A. LUZARDO, 162 JOCELYN DRIVE, DAVENPORT - FL 33897, PRESIDENT

ARTICLE VI REGISTERED AGENT

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

RAUL A. LUZARDO, 162 JOCELYN DRIVE, DAVENPORT - FL 33897

ARTICLE VII INCORPORATOR

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

CATHERINE ALARCON, 2013 WELLFLEET COURT UNIT 2B, ORLANDO - FL 32837