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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800)494-3124  
Fax Number : (305)675-2811

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

24HR CONGA CARIBBEAN LOUNGE INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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**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 :

24HR CONGA CARIBBEAN LOUNGE INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is :

11251 STATE ROAD 82

FORT MYERS, FL 33905

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

1500 COMMON SHARES PAR VALUE \$0.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS**

The name(s), address(es), and title(s) of the directors and officers is/are:

**PRESIDENT:**

REYNALDO LOPEZ

11251 STATE ROAD 82

FORT MYERS, FL 33905

**PRESIDENT:**

CEDRIC LEE

11251 STATE ROAD 82

FORT MYERS, FL 33905

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

CEDRIC LEE

11251 STATE ROAD 82

FORT MYERS, FL 33905

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the Incorporator is:

REYNALDO LOPEZ

11251 STATE ROAD 82

FORT MYERS, FL 33905

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

  
CEDRIC LEE/ REGISTERED AGENT

10/4/2007  
DATE

  
REYNALDO LOPEZ/ INCORPORATOR

10-4-2007  
DATE

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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