P07000/09978

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	W AIT	MAIL
. (Ви	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
	Office Use Only	
		,



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2007 OCT -4 PM 1: 5

T. Burch OCT 5

TRANSMITTAL LETTER

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

SUBJECT:	F.I.A. ENTERPRISES, CORPORATION		
	(Proposed corporate name - must include suffix)	•	

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

- □ \$70.00 Filing Fee
- \$78.75
 Filing Fee
 & Certificate
- □ \$122.20
 Filing Fee
 & Certified Copy
- □ \$131.25
 Filing Fee,
 Certified Copy
 & Certificate

Ť

FROM: FERRIOL R. ARAUCO

Name (Printed or typed)

17031 S.W. 150th Court
Address

MIAMI, FLORIDA 33187-6792 City, State & Zip

(305) 971-9687 Daytime Telephone Number

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

ARTICLES OF INCORPORATION

The undersiane	d, acting as incorporator(s) of a corporation pursuant to	Chapter 607.
	a, adopt(s) the following Articles of Incorporation:	
	,	<u> </u>
		70 The second se
	ARTICLE I	<u> </u>
	Name	F1L1
The name of the	e corporation shall be:	
		9루 -
	F.I.A. ENTERPRISES, CORPORATION	흥금 성
		<i>-</i> 01
	ABTIOLE II	
	ARTICLE II	
·	Principal place of business and mailing address	
i ne pri	ncipal place of business and the mailing address of this	corporation snall be:
	17031 S.W. 150th Court	
•	17001 3.44. 100til Godit	
	MIAMI, FLORIDA 33187-6792	
•		
	ARTICLE III	·
	Purpose(s)	
The specific pur	rpose(s) for which the corporation is organized is (are):	
•		
	ATION SHALL ENGAGE IN ANY ACTIVITY OR	
	RMITTED UNDER THE LAWS OF THE UNITED	
STATES AND	THE STATE OF FLORIDA	
	ARTICLE IV	
The officers of f	the corporation shall be:	
The officers of t	ine corporation shall be.	
President:	FERRIOL R. ARAUCO	
Secretary	IRMA D. ARAUCO	
Treasurer:	IRMA D. ARAUCO	
•		
		Filing Fee &
		CERTIFICATE: \$78.75

ARTICLE V

Limitation of Corporate Powers

The corporate powers of the corporation are as provided in Section 607 Florida Statutes, unless limited as follows:

The Corporation shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Incorporation.

ARTICLE VI

Initial registered agent and street address
The name and the street address of the initial registered agent is:

FERRIOL R. ARAUCO	
17031 S.W. 150th Court	
MIAMI, FLORIDA 33187-6792	
ARTICLE VII Incorporators See instructions for officers/direct The name(s) and the street address(es) of the incorporator(s) incorporation is (are):	
FERRIOL R. ARAUCO	
17031 S.W. 150th Court	
MIAMI, FLORIDA 33187-6792	
ARTICLE VIII These Articles of Incorporation shall be effective immediately Secretary of the State of Florida.	upon approval of the
ARTICLE IX The number of shares of stock that this corporation is authorized outstanding at any one time is: 1,000 Shares.	zed to have
The undersigned incorporator(s) has (have) executed these Arthis 1st day of October 2007 Signature(s) of Incorporator(s); FERRIODR. ARAUCO Typed name of Incorporator	·
Typed name of Incorporator	signing

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER 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 corp	pration is: F.I.A. ENTERPRISES, CORPORATION
	(must include suffix)
2. The name and addres	s of the registered agent and office is:
	FERRIOL R. ARAUCO
	(Name)
(Street add	ess - P.O. Box or Mail Drop Box NOT acceptable)
1703	S.W. 150 Court Miami, Fl 33187
	(Clty/State/Zip)
stated corporation at the appointment as registere comply with the provision	gistered agent and to accept service of process for the above place designated in this certificate, I hereby accept the d agent and agree to act in this capacity. I further agree to as of all statutes relating to the proper and complete s, and I am familiar with and accept the obligations of my ent.

10/01/07 (Date)