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Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION

TARIACURI INC.

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Help

12-3

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

TARIACURI INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

TARIACURI INC.

The principle place of business of this corporation shall be:
19197 SW 177 AVE. MIAMI, FL 33187

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:
100 shares 1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

MARIA MENDOZA (D)
52 NW 18 ST
HOMESTEAD, FL 33030

ALFONSO MENDOZA (D)
52 NW 18 ST
HOMESTEAD, FL 33030

H07000289641 3

ARTICLE VI INCORPORATOR(S)

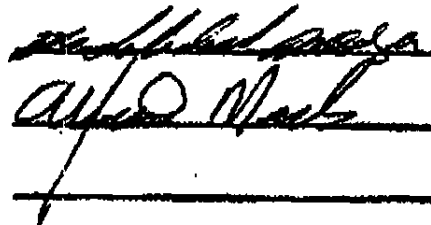
The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

MARIA MENDOZA (D)
52 NW 18 ST
HOMESTEAD, FL 33030

ALPONSO MENDOZA (D)
52 NW 18 ST
HOMESTEAD, FL 33030

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have)
executed these Articles of Incorporation this 30 day of November 2007

Signature(s) of Incorporator(s)


The block contains two handwritten signatures. The first signature, on the left, is written in dark ink and appears to be 'Maria Mendoza'. The second signature, on the right, is also in dark ink and appears to be 'Alponso Mendoza'. Both signatures are written over horizontal lines that serve as guides for the signature placement.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned 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 corporation:

TABLA CURLING

2. The name and address of the registered agent and office is:

MARIA MENDOZA
52 NW 18 ST
HOMESTEAD, FL 33030

Signature *Maria Mendoza*

Title *Director* Date *11/30/07*

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature *Maria Mendoza*

Date *11/30/07*