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· (Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(2)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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COVER LETTER

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

08 APR 24 PM 4: 07

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

SUBJECT: //45 ORIANA CORP. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:			
\$70.00 \square\s	\$78.75	\$87.50	
Filing Fee Filing Fee	Filing Fee	Filing Fee,	
& Certificate of Status	& Certified Copy	Certified Copy	
		& Certificate of	
	ADDITIONAL CO	Status PV REQUIRED	
FROM: RAFAEL J. CASAS Name (Printed or typed)			
Name (Printed or typed)			
501 BRICKEILKEY DRIVE Suite 405			
Address			
MIAMI, FL. 3313/ City, State & Zip			
City,	State & Zip		
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Daytime To	98 elephone number	<u>. </u>	
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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)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

08 APR 24 PM 4: 07

ARTICLE I NAME

The name of the corporation shall be:

1145 ORIANA COEP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2080 SOUTH OCEAN DR. # 1207

HALLANDALE BEACH, FL. 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY and ALL LAWFUL PURPOSES FOR BUSINESS PROFIT

ARTICLE IV SHARES

The number of shares of stock is: **300** Common VOTING SHARES

HAVING A PAR VALUE OF \$.01 PER SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOSE LUIS PADILLA PARRA, 2080 South Ocean DR. H1207, Hallandale BEACH, Fl. 33009 - Pres/Dir.
MIRNA Y. PARRA de PADILLA, 2080 South Ocean Dr. # 1207, Hallandale Beach, Fl. 33009 - VP. / Dir.
JOSE Luis Padilla VILORIA, 2080 South Ocean Or. #1207, Hallandale Beach, Fl. 33009 - Sec / Dir.

ARTICLE VI REGISTERED AGENT

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

RAFAEL J. CASAS

501 BRICKEN KEY DR. Sinte 405

MIAM: ,FL. 33131

ARTICLE VII INCORPORATOR

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

RAFAEL J. CASAS

501 BRICKEIL Key DR. Sik Yas

MIAMI, FL. 33131

Having been named as registered agent to accept service of process for the above stated 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

Signature/Incorporator

Signature/Incorporator

Date

U//8/03