

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6381

Erom:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: T20000000019
Phone: (305)552-5973

Fax Number : (305)220-1440

VISION OF CORPORATION

FLORIDA PROFIT/NON PROFIT CORPORATION

C.G. IMPORT & EXPORT INC.

| Certificate of Status | 0 |
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FROM : LAZARUS

FAX NO. :3052201440

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DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

C.G. Import & Export Inc.

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

12300 NW 10 LN, MIAMI Fl. 33182

ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

<u> ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

CARlos R. 60 nzález 12300 NW 10 LN, MiAMI, F1. 33182 FAX NO. :3052201440

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ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

CARlos R. 60 nzalez 12300 NW 10 LN, MIAMI, F1.33182

THE UNDERSIGNED INCORPORATION THESE ARTICLES

28 OF INCORPORATION THIS 2008

<u> ARTICLE VI - DIRECTOR(S)</u>

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

CARlos R. González 12300 NW 10 LN, MIAMI, F1.33182

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY, I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE

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