P08000068559

•				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Overight and the A. Fill Off				
Special Instructions to Filing Officer:				
<i>.</i>				

Office Use Only



300131982693

07/21/08--01037--024 **280.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

JUL 21 2008 D.A. WHITE

COVER LETTER

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

SUBJECT: Hughes	USA Inc (PROPOSED CORPOR	ate name – <u>must inci</u>	OUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: <u>FB</u>	Name	(Printed or typed)	
	15025 NW 77 Ave Suite 124	Address	· · · · · · · · · · · · · · · · · · ·
	Miami Lakes, FI 33014	, State & Zip	
	954 559 8400	Telephone number	

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)

ARTICLE I NAME

The name of the corporation shall be:

Hughes USA Inc

FILED

2008 JUL 21 P 3: 54

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

15025 NW 77 Ave Suite 124

MIAMILAKES FL 33014

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful transactions

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mauna Loa. Inc. President

Harrison Family Trust Vice President

REGISTERED AGENT

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

Carlos Garcia 15025 NW 77 Ave Suite 124 Miami Lakes, FI 33014

ARTICLE VII INCORPORATOR

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

Carlos Garcia 15024 NW 77 Ave Suite 124 Miami Lakes, FI 33014

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/Registered Agent

Signature/Incorporator