

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335 : (305)599-0839 Phone : (305)716-0346 Fax Number

FLORIDA PROFIT/NON PROFIT CORPORATION

MILA'S BAKERY INC.

| Certificate of Status | 0 |
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8/14/2008

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SECRETARY OF STATE
FALL AHASSEE, FLORIDA

ARTICLE OF INCORPORATION

<u>of</u>

MILA'S BAKERY 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: MILA'S BAKERY INC.

The principal place of business of this corporation shall be: 13425 SW. 56 th.ST.
MIAMI,FL.33175

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 State, 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 par value that this corporation is authorized to have outstanding at any one time is: $100 \times $10.00 = $1,000.00$

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) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

MILAGRITOS HONDERMANN DIRECTOR 13707 Sw. 66 ST. APT. C-805 MIAMI, FL. 33183

ARTICLE VI INCORPORATOR (3)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

MILAGRITOS HONDERMANN PRESIDENT 100 shares 13707 SW. 66 ST. APT.C-305 MIAMI,FL. 33183

| | The undersigned tion this14 | has (have) | executed | these Article of Incorpora | |
|-----------|-----------------------------|----------------|----------|----------------------------|------|
| | | , , | | AT US 104A | |
| | | • | | Signature/Title | J/ 4 |
| | · · | | · | Signature/Title | |
| H08000195 | 115 3 | | | Signature/Title | |

OB AUG 14 PH 3: 56
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501. 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 is:

| | MILA'S BAKERY INC. |
|-------------|---|
| | |
| ~ | |
| 2. | The name and address of the registered agent and office |
| | is MILAGRITOS HONDERMANN |
| , | (Name) |
| | |
| | 13707 SW. 66 ST. APT.C-305 |
| | (P. O. BOX NOT ACCEPTABLE) |
| | |
| | MIAMI, FLORIDA 33183 |
| | (CITY/STATE/ZIP) |
| | |
| | |
| | |
| HAV | ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE |
| DE I | PROCESS FOR THE ABOVE STATED CORPORATION AT THE FLACE DESI REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR |
| THE | R AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES |
| REL | ATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES |
| AND DAG1 | I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY ITION AS MY POSITION AS REGISTERED AGENT. |
| * O.J. | 11 AS AT POSITION AS REGISTERED AGAIN. |
| | |
| | |
| | SIGNATURE |
| | 20 4 20 |
| | DATE 08 14.08 |