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(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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AND ANASSEE. FLORID

EP 3/12/10

COVER LETTER

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

SUBJECT: LA NO	CHE ES MIA CORPORATION		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal 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	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	
_	ONARDO VALVERDE Nam 21 CYPRESS WAY W	e (Printed or typed)	
		Address	
<u>PA</u>	LM SPRING, FL 33406	State & Zip	
561	-541-0194 Daytime 1	elephone number	
uruç	guaricano@gmail.com		
`		d for future annual report r	otification)

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:

LA NOCHE ES MIA CORP.

ARTICLE II PRINCIPAL OFFICE

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

1421 CYPRESS WAY W PALM SPRINGS, FLORIDA 33406

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

100 COMMON SHARES PER VALUE \$0.01

<u> ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS</u>

List name(s), address(es) and specific title(s): DIRECTOR, PRESIDENT
LEONARDO VALVERDE
1421 CYPRESS WAY W
PALM SPRINGS, FLORIDA 33406

ARTICLE VI REGISTERED AGENT

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

JUAN CARLOS SAMPSON
1495 FOREST HILL BLVD., SUITE A
WEST PALM BEACH, FLORIDA 33406

ARTICLE VII INCORPORATOR

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

LEONARDO VALVERDE

1421 CYPRESS WAY W

PALM SPRINGS, FLORIDA 33406

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

3-2-10 Date

3-2-10

Date

Sworn to before me on this 2nd

Day of March, 2010

Notary Public Signature: Elba S. Rubio



ELSA S. RUBIO
Notary Public - State of Florida
My Comm. Expires Jul 28, 2013
Commission # DD 911888