

### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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# FLORIDA PROFIT/NON PROFIT CORPORATION PERISHABLE EXPORT IMPORT DELIVERY INC.

Certificate of Status

Certified Copy 1

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March 17 2011

To whom it may concern:

Please be advised that the owners of the company PERISHABLE EXPORT IMPORT

WERY MC. with the document number <u>P08000100860</u> are the same as those who are opening this new company with the same name. Thank you.

Sincerely,

HUGO BERLIOZ

SECRETARY OF STATE
DIVISION OF CORPORATION:

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SECRETARY OF STATE
DIVISION/OF CORPURATIONS

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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:

PERISHable Export Import Delivery INC.

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

17951 SW 115 AVE Miami FL 33157

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HUGO BERLIOZ 17951 SW 115 AVE Migmi FL 33157

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#### ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Hugo Berlioz 17951 Sw 115 AVE Miami FL 33157

\_\_ day of

The undersigned incorporator has executed these Articles of Incorporation this

ARTICLE VI- DIRECTOR (S)

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

HUGO BERLIOZ (P) RICARDO ANTONIO PUERTO (VP)

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

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.

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istered Agent Signature