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To:

Division of Corporations

: (850)617-6381 Fax Number

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 Phone : (800)494-3124 Fax Number : (561)455-9885

\*\*Enter the email address for this business entity to be used for Thutus annual report mailings. Enter only one email address please. \*\*

Address:			
	Address:	Address:	Address:

# FLORIDA PROFIT/NON PROFIT CORPORATION LATINO DISTRIBUTORS INC.

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Certified Copy	0
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## 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:

LATINO DISTRIBUTORS INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

518 RIVER WOOD CIRCLE ORLANDO, FLORIDA 32825



## 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:

1,500 COMMON SHARES PAR VALUE \$0.01

#### ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers ls/are:

DIRECTOR

DIRECTOR, TREASURER

JOSE RAMOS

MISAEL PABON PEREZ

518 RIVER WOOD CIRCLE

518 RIVER WOOD CIRCLE

ORLANDO, FLORIDA 32825

ORLANDO, FLORIDA 32825

DIRECTOR

TAINA JIMENEZ

518 RIVER WOOD CIRCLE

ORLANDO, FLORIDA 32825

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LATINO DISTRIBUTORS MERETARY OF STATE

### ARTICLE VI REGISTERED AGENT

The name and Fiorida street address of the registered agent is:

MISAEL PABON PEREZ 518 RIVER WOOD CIRCLE ORLANDO, FLORIDA 32825

## ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

JOSE RAMOS
518 RIVER WOOD CIRCLE
ORLANDO, FLORIDA 32825

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.

MISAEL PABON PEREZ Registered Agent

JOSE RAMOS /Incorporator

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