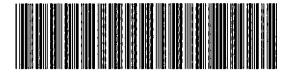
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Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			
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SECRETARY OF STATE
SECRETARY OF FLORID.

MB/14/12

## **COVER LETTER**

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

SUBJECT: South America Distribu	itors, Inc.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED
	ADDITIONAL COLLINGENCE
FROM: Rosa Y. Cordes	(Printed or typed)
2011 NE 27th Ct.	<b>.</b>
	Address
Lighthouse Point, FL 33	State & Zip
954-695-5628 Daytime T	elephone number
rosacordes@gmail.com E-mail address: (to be use	for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

*	ARTICLES OF 'In compliance with Chapter 6	FINCORPORATION 607 and/or Chapter 621,	F.S. (Profit)
ARTICLE I The name of the	NAME South America Dis	tributors, Inc.	SECRETARY OF STATE  Mailing address, if entire the LORIDA
ARTICLE II	PRINCIPAL OFFICE		ALLAHARY OF 58
	Principal street address		Mailing address, it exterent si
	2011 NE 27th Ct.		ORIDA
	Lighthouse Point, FL 33064		
ARTICLE III	PURPOSE		
The purpose for The genera	r which the corporation is organized is: al nature of the business to be tran ful business permitted under the la		
	shares of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRE  Title: Rosa Y. Cordes - President		e: <u>Elizabeth Migotto - Vice Presid</u> ent
Address:	2011 NE 27th Ct	Address:	2011 NE 27th Ct
ridaress.	Lighthouse Point, FL 33064		Lighthouse Point, FL 33064
Name and	Title: David B. Cordes - Director	Name and Tit	le:Eart Kristen - Director
Address:	2011 NE 27th Ct	Address:	2011 NE 27th Ct
	Lighthouse Point, FL 33064	<del>.</del>	Lighthouse Point, FL 33064
Nome and	l Title:	Nome and Tit	le
Address:	Title:	Address:	
	<del></del>		
ARTICLE VI		-1-1-> -6-1	and in
Name:	Florida street address (P.O. Box NOT acceptation Rosa Y. Cordes	able) of the registered ag	cit is.
Address:	2011 NE 27th Ct	<u> </u>	
. raa. 600.	Lighthouse Point, FL 33064		
		<del></del>	
ARTICLE VII	· · · · · · · · · · · · · · · · · · ·		
The <u>name and a</u> Name:	address of the Incorporator is:		
Name: Address:	Rosa Y Cordes		
Addiess.	2011 NE 27th Ct Lighthouse Point, FL 33064		
	amed as registered agent to accept service of I am familiar with and accept the appointment		
		,	5-8-12
	Required Signature/Registered Age	ent	Date
I submit this do document to the	ocument and affirm that the facts stated here Department of State constitutes a third degre	ein are true. I am awa e felony as provided for	re that the false information submitted in a in s.817.155, F.S.
			5040
	Paguinal Company		5-8-12 Date
	Required Signature/Incorporator	I	Date