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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KYT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
CARDELCA INVESTMENTS, CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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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: CARDELCA INVESTMENTS, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1965 NE 135th Street # 312
North Miami, FL. 33181

Mailing address, if different is:

1965 NE 135th Street
Apt. 312
North Miami, FL. 33181

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Legal Business / Activity
Permitted in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100 (one hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carmen E. Delgado - P
Address: 1965 NE 135th Street # 312
North Miami, FL. 33181

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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(cont)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Carmen E. Delgado
Address: 1965 NE 135th Street # 312
North Miami FL. 33181

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carmen E. Delgado
Address: 1965 NE 135th Street # 312
North Miami FL. 33181

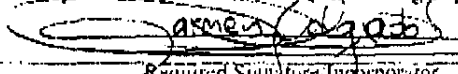
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature Registered Agent

10/02/2013
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature Incorporator

10/02/2013
Date