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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BARINAS & ASSOCIATES INC.

Account Number : 120000000082

Phone : (305)871-0889

Fax Number

: (305)870-9623

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

Emmil Address:

FLORIDA PROFIT/NON PROFIT CORPORATION INMOBILIARIA MAIPU LIMITADA INC

Certificate of Status	1
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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:

INMOBILIARIA MAIPU LIMITADA INC

ARTICLE II: PRINCIPAL OFFICE

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

10358 NW 129 ST HIALEAH GARDENS, FL 33018

ARTICLE III: SHARES

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

3000 SHARES AT NO PAR VALUE

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

SARA M BARBERIS QUEZADA 10358 NW 129 ST HIALIEAH GARDENS, FL 33018

ARTICLE V: INCORPORATORS

SARA M BARBERIS QUEZADA 10358 NW 129 ST HIALEAH GARDENS, FL 33018

ARTICLE VI: OFFICERS/DIRECTORS

PRESIDENT

VICEPRESIDENT

10358 NW 129 ST HIALEAH GARDENS, FL 33018 HIALEAH GARDENS, FL 33018

SARA M BARBERIS QUEZADA WALDO M MAC- CONELL BARBERIS 10358 NW 129 ST

> SECRETARY CAROLINA V MAC-CONELL BARBERIS 10358 NW 129 ST HIALEAH GARDENS, FL 33018

The undersigned incorporator (s) has (have) executed these Articles of Incorporation this:

12	NOVEMBER	
	_ day of	_, 2013
(An	additional article mus	st be added if an effective date is requested.)
		Al-
		Signature
		What CB
		Signature
		Contina Ince-Canell B

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

INMOBIL	JARIA	MAIPU	LIMIT	ADA'	INC
I LA LA LA PORT		. IVIMIE 🕶	- I I T T T T	~~~	1114

The name and address of the registered agent and office is:

S	SARA M BARBERIS QUEZADA		
	10358 NW 129 ST		
(P.O. BOX O	R MAIL DROP BOX NOT ACC	 EPTAI	

HIALEAH GARDENS, FL 33018

Having been named as registered agent and service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Movember 12, 2013

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314