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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019 : (305)552-5973 Phone Fax Number : (305)675-5944

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FLORIDA PROFIT/NON PROFIT CORPORATION **TORRES & SOSA ALF CORP**

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

*

ARTICLES OF INCORPORATION

: In compliance with Chapter 607 (Profit)

ARTICLE I NAME:	The name of	the corporation is
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TANDLEST THE MAN OF the corporation to	
Torres & Gosa ALF Corp	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
16230 SW 99 AVE	
Hiami, Florida 33157	
ARTICLE III SHARES: The number of shares of stock is: / O O	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
Haykel Izquierdo Torres P Jorge Darien Sosa Muro VP	— <u>Ş</u>
Jorge Darien Sosa Muro VP	2322 J
75	:
). (V)	=
` T:	
The name and Florida street address (PO Box not acceptable) of the registered age	
^	AIC ID.
Haykel Izquerdo Torres 16230 Sw 99 AVE	_
16230 SW 99 AVE MIGMI FL 33157	
MIAM(12 33.3)	
ARTICLE VI INCORPORATOR: The name and address of the Incorporat	or is:
Haylel Izquierdo Torres	
16230 SW 99 AVE	
10230 300 11 11 11 11 11 11 11 11 11 11 11 11 1	
1111211771 Land - 1111	

Required Signatures:

Having been named as registered agent to accept service of proces; 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

Registered Agent 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.

Incorporator

Date