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(Requestor's N BOD B.W. B7 AV (Address) MIAMI, FLORIDA (City, State,	ENUE, SUITE:16 33174 (305)552-5973	OFFICE USE ONLY
<u>(904)385-6735</u>		5:00001495519 -04/26/3501088009 ****122.50 *****87.50
CORPORATION NA	AME(s) & DOCUMENT NUMI	BER(S) (if known):
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NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Di	TOUR DUST
Limited Liability	Change of Registered Agent	0 0
Domestication	Dissolution/Withdrawal	
Other	Merger	
		J
OTHER FILINGS	REGISTRATION/ QUALIFICATION	· · ·
Annual Report	Foreign	
Fictitious Name	Limited Partnership	
Name Reservation		. 20
	Reinstatement) , 4-20
	Trademark	
Chara La Amar	Other	Examiner's Initials

CR2E031(10/92)



April 19, 1995

LAZARUS

MIAMI, FL 33174

SUBJECT: TRUST INVESTMENT COMPANY

Ref. Number: W95000008418

We have received your document for TRUST INVESTMENT COMPANY. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Letter Number: 295A00018412

Terri Buckley Corporate Specialist

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION 95 APR 20 PH 2: 54

TRUST INVESTMENTS OF SOUTH FLORIDA CO.

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:

TRUST INVESTMENTS OF SOUTH FLORIDA CO.

ARTICLE II PRINCIPAL OFFICE

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

5 721 SW 53 km South Miana. F1 33155

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ORLANDO BORGES. 5721 SW 53 ten Louth Miami F1 33155

ABTICLE V INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorpora-

(P/T): Or lande Borges 5721 sw (53 ten South Mismi F/ 33155

(VP/S): Anna H. Bonges 5721 500 53 ten South Miani F/ 33/55

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

Server touth day of april ... 1995.

Signature

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 APR 20 PH 2: 54

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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.

1.	The name of the corporation is: TRUST INVESTMENTS OF SOUTH FLORIDA CO	٠.
_		
2,	The name and address of the registered agent and office is:	
	Orlando Borges	
	(Name) ¹	
	57215W 53 ku.	
	(P.O. Box not acceptable)	
	South min F/ 33,55	

Having been named as registered agent and to accept 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.

(City/State/Zip)

(Signature)