

(SAMPLE LETTER OF TRANSMITTAL)  
P96000008336

Date January 16th., 1996

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

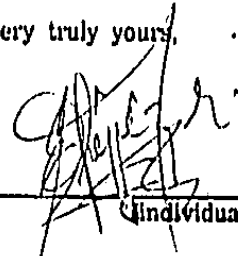
Re LA CREAZIONE CORPORATION  
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with a check in the amount of \$70.00.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

  
v \_\_\_\_\_  
(individual's name)

600001696136  
-01/24/96--01006--002  
\*\*\*\*122.50 \*\*\*\*122.50

LA CREAZIONE CORPORATION  
(name of corporation)

MAILING ADDRESS OF CORPORATION

11910 S.W. 35th. Street

Miami, Florida, 33175

PHONE (305) 541-2555

( 305 ) 551-3636  
Area Code Number

SN JAN 26 1996

FILED  
6 JAN 23 PM 12:26  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF INCORPORATION

of

LA CREAZIONE CORPORATION

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

## ARTICLE I - CORPORATE NAME

The name of the corporation is:

LA CREAZIONE CORPORATION

## ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

## ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

## ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Twenty thousand shares ( 1000 ) of twenty Dollar(s) (\$ 20.00 ) par value Common Stock, which shall be designated "Common Shares."

## ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	LA CREAZIONE CORPORATION		
ADDRESS	11910 S.W. 35th. Street		
CITY	Miami	FLORIDA	ZIP 33175

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	EFRAIN LOPEZ		
ADDRESS	11910 S.W. 35th. Street		
CITY	Miami	FLORIDA	ZIP 33175

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one ( 1 ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

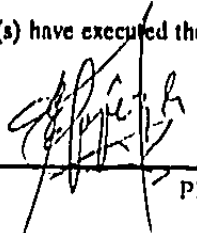
NAME	EFRAIN LOPEZ		
ADDRESS	11910 S.W. 35th. Street		
CITY	Miami	STATE Florida	ZIP 33175
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	EFRAIN LOPEZ		
ADDRESS	11910 S.W. 35th. St.		
CITY	MIAMI	STATE	FLORIDA
		ZIP	33175
NAME			
ADDRESS			
CITY		STATE	
		ZIP	
NAME			
ADDRESS			
CITY		STATE	
		ZIP	

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 16th. day of January, 19 96.

  
 \_\_\_\_\_ (Seal)  
 PRESIDENT  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)

STATE OF FLORIDA )  
 ) SS  
 COUNTY OF DADE )


before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

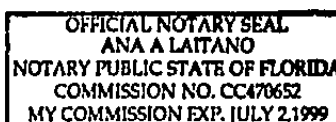
EFRAIN LOPEZ

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that have executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 16th. day of January, 19 96.

(Notary Seal)

  
 (Notary Public, State of Florida at Large) ANA A. LAITANO  
 My Commission expires:



**IMPORTANT:**

The Canary yellow first sheet in this set of forms is your WORK SHEET.  
 Detach this part and use for preparation prior to filling in the 2 part carbon interleaved set.

**CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT  
OF**

LA CREAZIONE CORPORATION

*(name of corporation)*

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with  
its registered office as indicated in the Articles of Incorporation

at 11910 S.W. 35th.

Miami, Florida, 33175

has named EFRAIN LOPEZ

located at the aforesaid address, as its Registered Agent to accept service of process  
within this state.

**ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above  
stated corporation at the place designated in this certificate, and being familiar with  
the obligations of that position, I hereby accept to act in this capacity, and agree to  
comply with the provisions of Florida Law in keeping open said office.

Y

  
(registered agent)  
EFRAIN LOPEZ

CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida Statutes, the following  
is submitted, in compliance with said Act:

First-That LA CREAZIONE CORPORATION  
(Name of Corporation)  
desiring to organize under the laws of the State of FLORIDA  
(Florida)  
with its principal office, as indicated in the articles of  
incorporation at City of MIAMI County  
(City)  
of DADE, State of FLORIDA  
(County) (State)  
has named EFRAIN LOPEZ  
(Name of Resident Agent)  
located at 11910 S.W. 35th. St.  
(Street address and number of building,  
Post Office Box address not acceptable)  
City of MIAMI, County of DADE  
(City) (County)  
State of Florida, as its agent to accept service of process within  
this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above  
stated corporation, at place designated in this certificate. I  
hereby accept to act in this capacity, and agree to comply with  
the provision of said Act relative to keeping open said office.

By ✓

Signature  
Registered Agent

CLERK OF STATE  
TALLAHASSEE, FLORIDA  
96 JAN 23 PM 12:26

FILED