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890 S.W. 87 AVENUE SUITE: 16

MIAMI, FLORIDA 33174 (305)552-5973
City/State/Zip Phone //

LOCAL REPRESENTATIVE TALLAHASSEE

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Examiner's Initials

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ARTICLES OF INCORPORATION
OF

ARTICLES OF INCORPORATION
ARTICLES OF IN

I , the undersigned, hereby make, adopt, subscribe and acknowledge these Articles of Incorporation for the purpose of organizing and incorporating under the laws of the State of Florida, by and under the provisions of the statutes of the State of Florida, providing for the formation, liability, rights, privileges and immunities of the corporation for profit.

ARTICLE I NAME

The name of the corporation shall be:

LOGAN COUNTY INC.

ARTICLE II - PURPOSE

The nature of the business, objects and purposes to be transacted and carried on are to engage in any activity of business permitted under the laws of the United States of America and of the State of Florida.

ARTICLE III - CAPITAL STOCK

The authorized capital stock of this corporation shall consist of 60 shares of common stock, having \$\frac{10.00}{2}\$ par value, which shall be issued for such consideration as may be fixed by the Board of Directors of the corporation.

ARTICLE IV - INITIAL CAPITAL

The amount of capital with which this corporation shall begin business shall be \$__600.00__.

ARTICLE V - CORPORATE EXISTENCE

The corporation shall exist perpetually unless dissolved according to law.

VKLICÍE	VI - POST OFFICE ADDRESS
The post office address of the p	principal office of this corporation shall be:
300 NE 183 st , MIAMI , FI	LORIDA 33179 .
with the privilege of having bra	anch or other offices at other places within or
without the State of Florida. 1	the principal office may be moved to such other
address as the Board of Director	es shall by resolution determine.
ARTICLE VI	II - NUMBER OF DIRECTORS
The business of this corporation	shall be conducted by a Board of Directors
consisting of two person	s initially.
The number of directors may be o	hanged from time to time By-Laws adopted by
the stockholders; but shall neve	r be less than the minimum number requiered
by the laws of the State of Flor	ida, as amended from time to time.
ARTICLE VI	II - INITIAL DIRECTORS
NAME	ADDRESS
JUAN F TABOADA	300 NE 183 st ,Miami , Florida 33179
JOSE L FRANZA	300 NE 183 st , Miami , Florida 33179

ARTICLE IX - OFFICERS

NAME	TITLE
JUAN F TABOADA	PRESIDENT
JOSE L FRANZA	SECRETARY/TREASURER

	ARTICLE X - SUBSCR	IBERS
The name and post office	addresses of the subse	cribers to these articles
are as follow:		
NAME		ADDRESS
JUAN F TABOADA		, SAME AS ARTICLE VIII
·	ARTICLE XI - AMENDA	<u>MENTS</u>
These Articles of Incorpo	ration may be amended	from time to time in the
manner provided by law.	Every amendment shall	be approved by the Board
of Directors, proposed by	them to the stockhold	ders and approved at a
stockholders' meeting by	a majority of the stoo	ckholders entitled to vote.
ARTICLE	XII - REGISTERED OF	FICE AND AGENT
The initial street addres	s of the registered of	ffice of the corporation is:
300 NE 183 st , MIAM	I , FLORIDA 33179	
and the registered agent	is:	•
juan f taboada		
The undersigned has (have) executed these Artic	les of Incorporation this:
day of	APRIL ,	19 <u>/</u> 96
		V //
	×/mm	(SEAL)

(SEAL)

(SEAL)

CERTIFICATE OF DESIGNATION 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.

	is: LOGAN: COUNTY INC.
	· *
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The name and address of the	registered agent and office is [7] [7]
	A S2 (%)
JUAN F TABOADA	711 A 1 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
300 NE 183 st	<u> </u>
(P.O.	BOX NOT ACCEPTABLE)
MIAMI , FLORIDA 33179	J _A
	(CITY/STATE/ZIP)
	SIGNATURE > CONTROLLY OF TOWN
	SIGNATURE X CORPORATE OFFICER) TITLE PRESIDENT

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 APPOINIMENT 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.