

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____
 PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

Jeffrey
 C. P. Conn
 AUTHORIZATION BY PHONE TO
 CORRECT add PA name
 to chief of department of
 state
 PK

PK 130/16

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE _____	_____	_____	_____
TIME _____	_____	_____	CK No. _____
BY <i>Jeff</i>	_____	_____	_____

WALK-IN 5/30 12:00
 Will Pick Up

RE: *Capital Connection* No. 53037
Interprocess

Capital Express™
☒ Art. of Inc. File
☐ Corp. Record Search
☐ Ltd. Partnership File
☒ Foreign Corp. File
☒ Cert. Copy (a) *Photo*
☐ Art. of Amend. File
☐ Dissolution/Withdrawal
☐ O U B-
☐ Fictitious Name File
☐ Name Reservation
☐ Annual Report/Reinstatement
☐ Reg. Agent Service
☐ Document Filing
☐ Corporate Kit
☐ Vehicle Search
☐ Driving Record
☐ Document Retrieval
☐ UCC 1 or 3 File
☐ UCC 11 Search
☐ UCC 11 Retrieval
☐ File No.'s, Copies
☐ Courier Service
☐ Shipping/Handling
☐ Phone ()
☐ Top Priority
☐ Express Mail Prep.
☐ FAX () pgs.
 SUBTOTALS

FEE.....	
DISBURSED.....	
SURCHARGE.....	
TAX on corporate supplies.....	
SUBTOTAL.....	
PREPAID.....	
BALANCE DUE.....	

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

RECEIVED
 96 MAY 30 AM 10:09
 DIVISION OF CORPORATIONS

**ARTICLES OF INCORPORATION
OF**

FILED

95 MAY 30 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PAPER LEAF ENTERPRISES, CORP

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:

PAPER LEAF ENTERPRISES, CORP

ARTICLE II PRINCIPAL OFFICE

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

9150 W. ATLANTIC # 1713 CORAL SPRINGS FL 33071

ARTICLE III CAPITAL STOCK

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

500 SHARES AT \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registration agent is :

**GUSTAVO GUANIPA 9150 W ATLANTIC BLVD # 1713 CORAL SPRINGS FL
33071**

ARTICLE V INCORPORATOR(S)

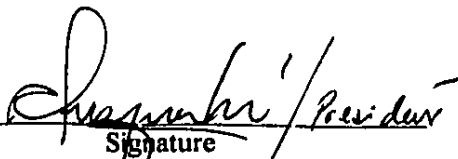
The name (s) and street address (es) of the incorporator(s) to these Articles of Incorporation is (are):

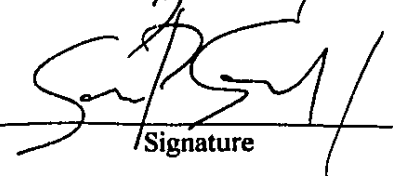
Gustavo Guanipa : 9150 W Atlantic Blvd Apt 1713 Coral Springs, FL 33071

Soraya Palis : 9150 W Atlantic Blvd Apt 1713 Coral Springs, FL 33071

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

28 day of 1996


Signature


Signature

Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

RECEIVED
MAY 30 11:00
TALLAHASSEE, FLORIDA

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

1. The name of the corporation is:

PAPER LEAF ENTERPRISES, CORP

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

GUSTAVO GUANIPA

9150 West Atlantic Blvd # 1713
(P.O Box not acceptable)

CORAL SPRINGS - FL 33071
(City /State /Zip)

**having been named as registered agent and to accept service of process for the above stated
PAPPPPPPPPPace designated in this certificate, i hereby accept the appointment as
registeree agent and agree to act in this capacity. I further agree to comply with 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.**


Signature

5/28/96
Date