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MIAMI 25 JUL 1996

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96 JUL 29 AM 10:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee Fla. 32314

Re: RAMEC NURSERY INC.

0000015.07940
-07/30/96--01092--013
****122.50 ****122.50

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.500

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

Very truly yours,


Angel Pino.

RAMEC NURSERY INC.

1940 N.W. 191 Street
Miami Fla. 33056

(954) 433-7991

PH
7/31/96

ARTICLES OF INCORPORATION

of

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RAMEC NURSERY INC.

(name of corporation)

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The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt the following articles of incorporation for such corporation:

STATE
TALLAHASSEE, FLORIDA

ARTICLE I - CORPORATE NAME

The name of the corporation is:

RAMEC NURSERY INC.

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 2 shares of common stock, par value \$ 100.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS	1940 N.W. 191 Street		
CITY	Miami	FLORIDA	ZIP 33056

Mailing address, if different

STREET ADDRESS	P.O. Box 825081		
CITY	South Florida	FLORIDA Fla.	ZIP 33082-5081

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Angel Pino		
ADDRESS	1940 N.W. 191 Street		
CITY	Miami	FLORIDA Fla.	ZIP 33056

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have Two 2 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 directors of the corporation are as follows:



NAME <u>Angel Pino</u>			
ADDRESS <u>1940 N.W. 191 Street</u>			
CITY <u>Miami</u>	STATE <u>Fla.</u>	ZIP <u>33056</u>	
NAME <u>Estela Delgado</u>			
ADDRESS <u>1940 N.W. 191 Street</u>			
CITY <u>Miami</u>	STATE <u>Fla.</u>	ZIP <u>33056</u>	
NAME _____			
ADDRESS _____			
CITY _____	STATE _____	ZIP _____	

ARTICLE VIII - INCORPORATORS

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

NAME <u>Angel Pino</u>			
ADDRESS <u>1940 N.W. 191 Street</u>			
CITY <u>Miami</u>	STATE <u>Fla.</u>	ZIP <u>33056</u>	
NAME ANGEL PINO <u>Estela Delgado</u>			
ADDRESS <u>1940 N.W. 191 Street</u>			
CITY <u>Miami</u>	STATE <u>Fla.</u>	ZIP <u>33056</u>	
NAME _____			
ADDRESS _____			
CITY _____	STATE _____	ZIP _____	

The undersigned incorporator(s) have executed these Articles of Incorporation this 25 day of July, 1996.

 (Signature)
 (Signature)
 _____ (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RAMEC NURSERY INC.

(name of corporation)

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

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

at 1940 N.W. 191 Street

Miami Florida 33056

has named Angel Pino

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

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 regis-
tered 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.

Angel S. Pino
(Signature)

25 July 1996
(Date)