PALOQUANTA PILED 30

96 AUG 30 AM II: 03 SECIO E TALLAHASSEL FLORIDA

Department of State Division of Corporations P. O. Box 6327 Tallahasseo, FL 32314

(\$1000011924196 -08/16/36--01042--015 ****131.25 ****131.25

SUBJECT: KI		orp. Inc.							
(F	mx) W9	W96-1733J							
				502 1001					
Enclosed is an original and one (1) copy of the articles of incorporation and a check									
for : \$70.00 Filling Fee	\$78.75 Filing Fee & Certificate	#122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Cerdified Copy & Cerdificate						
FROM:	Name	DNA GANDA (printed or typed)							
5401 COLLINS AVE ALT. 224									
MI AMI BEACH FLORIDAS 33140 City, State & Zip									
		- 865-734	3						
	Daytime	Telephone number							

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 20, 1996

ADRIANA GANDARA 5401 COLLINS AVENUE APT. #224 MIAMI BEACH, FL 33140

SUBJECT: KIKII'S CORP. INC. Ref. Number: W96000017380

We have received your document for KIKII'S CORP. INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(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.

The document must state the number of shares of authorized stock.

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) 487-6927.

Kathy Hyman Document Specialist

Letter Number: 996A00039483

ARTICLES OF INCORPORATION

96 AUG 30 AU II: O

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 1 NAME

The name of the corporation shall be:

"KIKII'S HOUSE AT THE CARRIAGE" I'ME.

ARTICLE II & PRINCIPAL OFFICE

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

5401 CULLINS AVE, CU11 A MIAMI BEACH, FLORIDA 33140

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

ADRIANA GANDARA 5401 COLLINS AVE APT 224 MIAMI BEACH, FL 33/40

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

ADRIANA GANDARA PRES. -5401 COLLINS AVE AFT 224 MIAMI BEACK, FL 33140

The und	ersigned in	corporator(s) has(have	executed these Articles of Incorporation this
13	day of _	August	, 19 <u>96</u>
(An addi	tional artic	le must be added if an	effective date is requested.)
		(a Jandare
	-		Signature
	-		Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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.

1. The name of the corporation is:	"KiKii's		<u></u>					
	House	AT The	CARRIA	ise The				
2. The name and address of the registered agent and office is:								
ADRIANA GANDARA (NAME) 5401 COLLINS AND ADT 204 3 11 (P.O. BOX OF MAIL DTOP BOX NOT ACCEPTABLE) MI AMI BEACH FL 33140 2 2								
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.								
Q Quelle (SIGNATUR	E)	(DATE)	8/13/91	?				