# ACCOUNTAINTED 346

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

100001962771 -10/02/96--01040--001 \*\*\*\*\*78.50 \*\*\*\*\*78.50

SUBJECT:JUAN	Proposed corporat	SONS CIGAR CO. e name - must include t	uffix)	•
Enclosed is an original	and one (1) co	ppy of the articles o	f Incorporation and (	96 OCT -2 SECAETARN TABLES TAB
for : \$70.00	<b>3</b> \$78.75	<b>□</b> \$122.50	<b>    \$131.25</b>	-2 PHIZ: 06 ARY OF STATE ASSEE FLORIDA
FROM:	HIDAL/ Nac	GO VALDES ne (printed or typed)		Sm or
f ,		Address FLA. 33165		
	<del></del>	City, State & Zip		
	Dayt	Ikme Telephone number	•	

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

## ARTICLES OF INCORPORATION

SECRET SEE F. SIN

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: JUAN VALDES & SONS CIGAR CLINC.

#### ARTICLE II PRINCIPAL OFFICE

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

1000 S.W. 140th AVENUE MIAMI, FLORIDA 33184

#### ARTICLE III SHARES

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

1000 at \$1.00 par value

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HIDALGO VALDES 8931 S.W. 20th STREET MIAMI, FLA. 33165

#### INCORPORATOR(8) ARTICLE V

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is (are): HIDALGO VALDES 8931 S.W. 20th STRRET

MIANI, FLA. 33165

JANICE P. BRITO 5021 S.W. 151th PLACE

ISMABL REYES 8931 S.W. 20th STREET MIAMI, FLA. 33165 .

ELY VELOSO . 8931 S.W. 20thSTREET MIAMI, FLA. 33165

The undersigned incorporator(s) has(have) executed these Articles of incorporation this 11.3

Articles of Incorporation

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Fiorida Statutes, the undersigned corporation, organized under the laws of the State of Fiorida, submits the following statement in designating the registered office/registered agent, in the State of Fiorida.

) name and address	of the registered agent and office is: HIDALGOD VALDES 0993 9.47. 2006 TREET	·
	(NAME)	
•	8931 S.W. 20th STREET	SECTIALLY
(P.0	D. BOX NOT ACCEPTABLE)	T -2
	MIANI, FLA. 33165	PH N OF N OF
	(CITY/STATE/ZIP)	E TATE ORID

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.

SIGNATURE De de des						
DATE_	26	SEPT	1996			