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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY
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NAME: ANDLERS BUILDING, CORP.

AUDIT NUMBER.....H97000001697

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 4

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ARTICLES OF INCORPORATION

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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:

Andlers Building, Corp.

ARTICLE II PRINCIPAL OFFICE

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

9630 SW 115 Ave
Miami, FL 33176

ARTICLE III SHARES

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

100 shares \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Gloria Patricia Babin
9630 SW 115 Ave
Miami, FL 33176

Maria Del Carmen Calzon, Esq.
Calzon, Gayoso & Gersten, P.A.
FL Bar # 797383
1050 Spring Garden Rd.
Miami, FL 33131
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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):

Gloria P. Barzin
9630 SW 115 AVE
Miami, FL 33176

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

_____ day of _____, 19_____.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

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

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**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 Anclens Building Corp
2. The name and address of the registered agent and office is:

Gloria Patricia Bazein
(NAME)
9630 SW 115 AVE
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)
Miami FL 33176
(CITY/STATE/ZIP)

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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)

1-23-97
(DATE)

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DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314