P97000046320 TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 700002189357--6 -05/23/97--01014--004 *****78.75 ******78.75

	LOLAYA, I	NC . name - must include s	uffix)	
Enclosed is an original a for : \$70.00 Filing Fee	nd one (1) cor x \$78.75 Filing Fee & Certificate	oy of the articles of \$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	d a check
FROM:		O GARCIA e (printed or typed)		
MAUTICIO GARCIA GAVE	8574 N	Address		ST HAY 2
AUTHORIZATION BY PHONE TO CORRECT Traditional NAN	ر د	FLORIDA 33166 City, State & Zip		23 AM 8: 44 23 AM 8: 44
DOC. EXAM_B3B		ne Telephone number	5/20/90	Dr

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

ARTICLES OF INCORPORATION TALLAHASSEE, FLORIDA

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:

ALMACEN LOLAYA, INC.

ARTICLE II PRINCIPAL OFFICE

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

8574 N.W. 56 STREET MIAMI FLORIDA 33166

ARTICLE III SHARES

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

500 SHARES OF COMMON STOCK HAVING OF \$1.00 PER VALUE PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MAURICIO GARCIA 8574 N.W. 56 STREET MIAMI FLORIDA 33166

ARTICLE V INCORPORATOR(S)

	the capeta work
	IME GARCIA-MORA
	60 S.W. 159 PLACE
WI	AMI FL. 33193
ARTI	CLE VI. NATURE OF BUSINESS
ACTIVITIES OR BUSINES	ENGAGE OR TRANSACT IN ANY OR ALL LAWFUL S PERMITTED UNDER THE LAWS OF THE UNITED FLORIDA OR ANY OTHER STATE, COUNTRY OR NATION
ARTIC THIS CORPORATION IS T	LE VII. TERM OF EXISTENCE O EXIST PERPETUALLY
ARTIC	LE VIII. OFFICER/OWNER SHARES
	IS THE OWNER OF THE SHARES
NAME	OFFICER
MAURICIO GARCIA	PRESIDENT/TREASURE
The undersigned incorporato	r(s) has(have) executed these Articles of Incorporation this
day o	f, 19_97
	Signature
	Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501. 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:_	ALMACEN LOLAYA, INC.	
			109 0
2. The name	and address of the re	gistered agent and office is:	是是20
	MAURICI <u>O GA</u>	RCIA	The state of the s
•		(Name)	F. 60
	8574 N.W.	56 STREET	
	(P.	O. Box <u>not</u> acceptable)	
	MIAMI FLOR	RIDA 33166	
		(City/State/Zip)	
Having bee above state the appoint to comply w mance of m as registere	n named as registered d corporation at the pl ment as registered age with the provisions of all y duties, and I am fami and agent.	agent and to accept service of lace designated in this certificate ent and agree to act in this capar is statutes relating to the proper liar with and accept the obligation	process for the e, I hereby accept city. I further agree and complete perfor- ons of my position
H	um Gar	MAY-12-1	
	(Signature)	(!	Date)

#P97-46321

is Missing.
Will be filmed
When RECEIVED.