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97 MAY 23 PM 2: 39

SECRETARY OF STATE TALLARASSEE, FLORIDA

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

SUBJECT:	Mio	ımi Katz Inc.		_
	(Proposed o	corporate name - must include	e suffix)	
			800002189 -05/23/97 ****131.29	33087 -01066002 5 ****131.25
Enclosed is an original as	nd one(1) copy of the article	es of incorporation and a	check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	Li\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Pedro Name (Ros A. Printed or typed)		
_	12316 SW	18th ter Mia	im.	
_	Mīamī Ciņ	FL 33175 y, State & Zip		
<u> </u>	ome (308) 2274776 (3 Daytime	<u>KEDRO</u> AUTHORE	Kosa GAY ZATION BY PHONE SHARES (ART. TIT 27-97	TC

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

N5-27-97

ARTICLES OF INCORPORATION

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The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

TALLA EL LORIDA

ARTICLE I NAME

The name of the corporation shall be:

MIami Katz inc.

ARTICLE II PRINCIPAL OFFICE

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

12316 South West 18th terras

Miami Florida 33175

ARTICLE III SHARES

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

ONE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

''Pedro Rosa 12316 Sw 18th ter. Miami Fl. 33175

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Pedro Rosa 12316 Sw 18th Ter. Miami Fl. 33175

Signature/Incorporator

Date

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

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/Registered Agent

Date